

# Instructions For Starting your Divorce, Legal Separation or Nullity

The attached forms can be used to seek a **dissolution of marriage** [divorce], **legal separation** [which allows the court to divide community property and make orders for custody or support, but does not terminate your marriage], or an **annulment** [nullity] of a marriage that was not valid due to one of several specific grounds. In order to seek a divorce in this county, you or your spouse must have lived in California for at least the last six months and in Fresno County for at least the last three months.

This packet includes a “**Summons**” [FL-110], “**Petition**” [FL-100], “**Proof of Service of Summons**” [FL-115], a “**Declaration Under UCCJEA**” [FL-105] which must be completed only if you have children with your spouse, a “**Declaration of Disclosure**” [FL-140], a “**Schedule of Assets and Debts**” [FL 142] and an “**Income and Expense Declaration**” [FL 150] along with instructions for completing the forms. All of these documents need to be completed, filed and served on your spouse. There is also a blank “**Response**” [FL 120], which is served with the above documents.

There is a first time filing fee for filing the enclosed forms unless you are eligible for a “**Fee Waiver**” which is available as a separate packet.

Filing and serving the Summons and Petition will give the court jurisdiction to make orders in your case, but it is only the beginning. You will need to prepare and file additional documents to actually get court orders or a judgment of divorce, legal separation or nullity. Your marriage is not dissolved until there is a signed “**Judgment**” from the court.

If you do not want to wait until your judgment to get orders for custody, visitation, support, or property control, you may want to complete, file and serve “**Order to Show Cause**” [OSC] packet. The Order to Show Cause is used to ask the court to make orders and to set a hearing date. The OSC packet can be served on your spouse along with the initial divorce documents.

# Steps to Obtain a Divorce

1. File a Summons and Petition for Dissolution. These and other forms are available from the Clerk's Office or on the Internet at [www.courtinfo.ca.gov](http://www.courtinfo.ca.gov).

2. Have an adult, **NOT YOU**, serve your spouse with the divorce papers.

Remember this



Date: \_\_\_\_\_

3. Did your spouse file a Response within 30 days?

NO

YES

4. You can get a divorce by Default Judgment without going to court if your spouse does not file a Response to the Petition for Dissolution. To obtain a divorce by Default Judgment, you must complete and file the forms in the **DEFAULT JUDGMENT PACKET**.

4. Do you and your spouse have a written agreement?

YES

NO

5. File your final judgment papers and the written agreement..

5. Your case will need to go to trial. File these papers:

- At-Issue Memorandum.
- Settlement Conference Statement.

5. Do you and you spouse have a written agreement?

NO

YES

6. File your final papers for a Default Judgment.

6. File your final judgment papers with the written agreement. Your spouse's signature on the agreement must be notarized.

## IMPORTANT:

The earliest you can be divorced is in **6 months and 1 day** from the date your spouse was served or the date a Response was filed (whichever is earlier): See date written in above.

The Notice of Entry of Judgment will be mailed to you. This is **not** the Judgment in your case. You must pick up the Judgment at Fresno County Superior Court, Family Law Clerk's Office, 4th Floor—1100 Van Ness, Fresno.

# **SAMPLE FORMS**

**SUMMONS (Family Law)**

NOTICE TO RESPONDENT (Name): **1**

AVISO AL RESPONDEDOR (Nombre): **1**

You are being sued. **Lo están demandando.**

Petitioner's name is: **2**

Nombre del solicitante: **2**

CASE NUMBER (NÚMERO DE CASO):

FL-110

**CITACIÓN (Derecho familiar)**

FOR COURT USE ONLY  
(SÓLO PARA USO DE LA CORTE)

You have **30 calendar days** after this *Summons* and *Petition* are served on you to file a *Response* (form FL-120 or FL-123) at the court and have a copy served on the petitioner. A letter or phone call will not protect you.

If you do not file your *Response* on time, the court may make orders affecting your marriage or domestic partnership, your property, and custody of your children. You may be ordered to pay support and attorney fees and costs. If you cannot pay the filing fee, ask the clerk for a fee waiver form.

If you want legal advice, contact a lawyer immediately. You can get information about finding lawyers at the California Courts Online Self-Help Center ([www.courtinfo.ca.gov/selfhelp](http://www.courtinfo.ca.gov/selfhelp)), at the California Legal Services Web site ([www.lawhelpcalifornia.org](http://www.lawhelpcalifornia.org)), or by contacting your local county bar association.

*Tiene 30 días corridos después de haber recibido la entrega legal de esta Citación y Petición para presentar una Respuesta (formulario FL-120 o FL-123) ante la corte y efectuar la entrega legal de una copia al solicitante. Una carta o llamada telefónica no basta para protegerlo.*

*Si no presenta su Respuesta a tiempo, la corte puede dar órdenes que afecten su matrimonio o pareja de hecho, sus bienes y la custodia de sus hijos. La corte también le puede ordenar que pague manutención, y honorarios y costos legales. Si no puede pagar la cuota de presentación, pida al secretario un formulario de exención de cuotas.*

*Si desea obtener asesoramiento legal, póngase en contacto de inmediato con un abogado. Puede obtener información para encontrar a un abogado en el Centro de Ayuda de las Cortes de California ([www.sucorte.ca.gov](http://www.sucorte.ca.gov)), en el sitio Web de los Servicios Legales de California ([www.lawhelpcalifornia.org](http://www.lawhelpcalifornia.org)) o poniéndose en contacto con el colegio de abogados de su condado.*

**NOTICE:** The restraining orders on page 2 are effective against both spouses or domestic partners until the petition is dismissed, a judgment is entered, or the court makes further orders. These orders are enforceable anywhere in California by any law enforcement officer who has received or seen a copy of them.

**AVISO:** Las órdenes de restricción que figuran en la página 2 valen para ambos cónyuges o pareja de hecho hasta que se desista la petición, se emita un fallo o la corte dé otras órdenes. Cualquier autoridad de la ley que haya recibido o visto una copia de estas órdenes puede hacerlas acatar en cualquier lugar de California.

1. The name and address of the court are (El nombre y dirección de la corte son):

**4** **SUPERIOR COURT OF CALIFORNIA - COUNTY OF FRESNO**

1130 "O" Street  
Fresno, California 93724-0002

2. The name, address, and telephone number of the petitioner's attorney, or the petitioner without an attorney, are:  
(El nombre, dirección y número de teléfono del abogado del solicitante, o del solicitante si no tiene abogado, son):

**5**

Date (Fecha): **6** Clerk, by (Secretario/a): **7**, Deputy (Asistente)

[SEAL]

**NOTICE TO THE PERSON SERVED:** You are served

**AVISO A LA PERSONA QUE RECIBIÓ LA ENTREGA:** Esta entrega se realiza

a. ☐ as an individual. (a usted como individuo.)

b. ☐ on behalf of respondent who is a (en nombre de un respondedor que es):

(1) ☐ minor (menor de edad)

(2) ☐ ward or conservatee (dependiente de la corte o pupilo)

(3) ☐ other (specify) (otro - especifique):

(Read the reverse for important information.)  
(Lea importante información al dorso.)

**8**

Form Adopted for Mandatory Use  
Judicial Council of California  
FL-110 (Rev. January 1, 2009)

**SUMMONS**  
(Family Law)

Page 1 of 2  
Family Code §§ 232, 233, 2040, 7700;  
Code of Civil Procedure, §§ 412.20, 415.60-415.60  
[www.courtinfo.ca.gov](http://www.courtinfo.ca.gov)

*How to fill out*

## SUMMONS (FL-110)

### DIRECTIONS:

- Find a number on the sample form  
*Example: 1*
- Go to the same number below to find out how to complete the form
- Type or print in blue or black ink
- If you know the CASE NUMBER fill it in. If not known, leave it blank.

- 1** Write the name of your spouse (husband or wife). This form will be served (given in person) to your spouse.
- 2** Write your name here.
- 3** There is nothing to fill out here, but you should read these sections carefully.
- 4** If not filled in for you, write in the Court's address. The address is: 1130 "O" Street, Fresno CA 93724-2201. The Branch Name is: B.F. Sisk Courthouse.
- 5** Fill in your name, address, city, state and zip, and telephone number (if you have one).
- 6** Do not write here.
- 7** Do not write here.
- 8** Check box "a".

# SUMMONS (FL-110)

- page two -

**\*\* SEE NOTE BELOW \*\***

## WARNING—IMPORTANT INFORMATION

**WARNING:** California law provides that, for purposes of division of property upon dissolution of a marriage or domestic partnership or upon legal separation, property acquired by the parties during marriage or domestic partnership in joint form is presumed to be community property. If either party to this action should die before the jointly held community property is divided, the language in the deed that characterizes how title is held (i.e., joint tenancy, tenants in common, or community property) will be controlling, and not the community property presumption. You should consult your attorney if you want the community property presumption to be written into the recorded title to the property.

## STANDARD FAMILY LAW RESTRAINING ORDERS

Starting immediately, you and your spouse or domestic partner are restrained from

1. removing the minor child or children of the parties, if any, from the state without the prior written consent of the other party or an order of the court;
2. cashing, borrowing against, canceling, transferring, disposing of, or changing the beneficiaries of any insurance or other coverage, including life, health, automobile, and disability, held for the benefit of the parties and their minor child or children;
3. transferring, encumbering, hypothecating, concealing, or in any way disposing of any property, real or personal, whether community, quasi-community, or separate, without the written consent of the other party or an order of the court, except in the usual course of business or for the necessities of life; and
4. creating a nonprobate transfer or modifying a nonprobate transfer in a manner that affects the disposition of property subject to the transfer, without the written consent of the other party or an order of the court. Before revocation of a nonprobate transfer can take effect or a right of survivorship to property can be eliminated, notice of the change must be filed and served on the other party.

You must notify each other of any proposed extraordinary expenditures at least five business days prior to incurring these extraordinary expenditures and account to the court for all extraordinary expenditures made after these restraining orders are effective. However, you may use community property, quasi-community property, or your own separate property to pay an attorney to help you or to pay court costs.

## ADVERTENCIA – INFORMACIÓN IMPORTANTE

**ADVERTENCIA:** De acuerdo a la ley de California, las propiedades adquiridas por las partes durante su matrimonio o pareja de hecho en forma conjunta se consideran propiedad comunitaria para los fines de la división de bienes que ocurre cuando se produce una disolución o separación legal del matrimonio o pareja de hecho. Si cualquiera de las partes de este caso llega a fallecer antes de que se divida la propiedad comunitaria de tenencia conjunta, el destino de la misma quedará determinado por las cláusulas de la escritura correspondiente que describen su tenencia (por ej., tenencia conjunta, tenencia en común o propiedad comunitaria) y no por la presunción de propiedad comunitaria. Si quiere que la presunción comunitaria quede registrada en la escritura de la propiedad, debería consultar con un abogado.

## ÓRDENES DE RESTRICCIÓN NORMALES DE DERECHO FAMILIAR

En forma inmediata, usted y su cónyuge o pareja de hecho tienen prohibido:

1. Llevarse del estado de California a los hijos menores de las partes, si los hubiere, sin el consentimiento previo por escrito de la otra parte o una orden de la corte;
2. Cobrar, pedir prestado, cancelar, transferir, deshacerse o cambiar el nombre de los beneficiarios de cualquier seguro u otro tipo de cobertura, tal como de vida, salud, vehículo y discapacidad, que tenga como beneficiario(s) a las partes y su(s) hijo(s) menor(es);
3. Transferir, gravar, hipotecar, ocultar o deshacerse de cualquier manera de cualquier propiedad, inmueble o personal, ya sea comunitaria, cuasicomunitaria o separada, sin el consentimiento escrito de la otra parte o una orden de la corte, con excepción las operaciones realizadas en el curso normal de actividades o para satisfacer las necesidades de la vida; y
4. Crear o modificar una transferencia no testamentaria de manera que afecte el destino de una propiedad sujeta a transferencia, sin el consentimiento por escrito de la otra parte o una orden de la corte. Antes de que se pueda eliminar la revocación de una transferencia no testamentaria, se debe presentar ante la corte un aviso del cambio y hacer una entrega legal de dicho aviso a la otra parte.

Cada parte tiene que notificar a la otra sobre cualquier gasto extraordinario propuesto, por lo menos cinco días laborales antes de realizarlo, y rendir cuenta a la corte de todos los gastos extraordinarios realizados después de que estas órdenes de restricción hayan entrado en vigencia. No obstante, puede usar propiedad comunitaria, cuasicomunitaria o suya separada para pagar a un abogado o para ayudarle a pagar los costos de la corte.

## NOTE:

There is nothing to fill out on this page. You should carefully read the information on this page.

## How to fill out

## PETITION (FL-100)

### DIRECTIONS:

- ▶ Find a number on the sample form.  
*Example: 1*
- ▶ Go to the same number below to find out how to fill out the form
- ▶ Type or print in blue or black ink
- ▶ If you know the CASE NUMBER fill it in. If not known, leave it blank.

FL-100	
<div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><b>1</b> <small>ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):</small></div> <div style="display: flex; justify-content: space-between; font-size: x-small;"><div>TELEPHONE NO.: E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):</div><div>FAX NO. (Optional):</div></div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><b>2</b> <b>SUPERIOR COURT OF CALIFORNIA • COUNTY OF FRESNO</b> 1100 Van Ness Avenue Fresno, California 93724-0002</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><b>MARRIAGE OF</b> <b>PETITIONER:</b> <b>3</b> <b>RESPONDENT:</b></div> <div style="border: 1px solid black; padding: 2px;"><b>PETITION FOR</b> <input type="checkbox"/> Dissolution of Marriage <input type="checkbox"/> Legal Separation <input type="checkbox"/> Nullity of Marriage <input type="checkbox"/> AMENDED <b>4</b></div>	<div style="border: 1px solid black; height: 100px; width: 100%;"></div> <div style="font-size: x-small;">CASE NUMBER:</div>
<div><b>1. RESIDENCE (Dissolution only)</b> <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent has been a resident of this state for at least six months and of this county for at least three months immediately preceding the filing of this <i>Petition for Dissolution of Marriage</i>. <b>5</b></div> <div><b>2. STATISTICAL FACTS</b> a. Date of marriage: <b>6</b> b. Date of separation: <b>6</b> c. Time from date of marriage to date of separation (specify): Years: Months: <b>7</b> Child's name: Birthdate: Age: Sex:</div> <div><b>3. DECLARATION REGARDING MINOR CHILDREN</b> (include children of this relationship born prior to or during the marriage or adopted during the marriage): a. <input type="checkbox"/> There are no minor children. b. <input type="checkbox"/> The minor children are: <input type="checkbox"/> Continued on Attachment 3b. c. If there are minor children of the Petitioner and Respondent, a completed <i>Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)</i> (form FL-105) must be attached. d. <input type="checkbox"/> A completed voluntary declaration of paternity regarding minor children born to the Petitioner and Respondent prior to the marriage is attached.</div> <div><b>4. SEPARATE PROPERTY</b> Petitioner requests that the assets and debts listed <input type="checkbox"/> in <i>Property Declaration</i> (form FL-160) <input type="checkbox"/> in Attachment 4 <input type="checkbox"/> below be confirmed as separate property. Item: Confirm to: <b>8</b></div>	
<div style="border: 1px solid black; padding: 5px; font-size: x-small;">NOTICE: You may redact (black out) social security numbers from any written material filed with the court in this case other than a form used to collect child or spousal support.</div> <div style="display: flex; justify-content: space-between; font-size: x-small;"><div>Form Adopted for Mandatory Use Judicial Council of California FL-100 (Rev. January 1, 2006)</div><div><b>PETITION—MARRIAGE</b> (Family Law)</div><div>Page 1 of 2 Family Code, §§ 2330, 3409; www.courtinfo.ca.gov</div></div>	

- 1** Write your name and address. You may fill in your phone number, email and fax if you want to.
- 2** If not filled in for you, write “Fresno” after COUNTY OF. The address is: 1130 "O" Street, Fresno CA 93724-2201. The Branch Name is: B.F. Sisk Courthouse.
- 3** Write your name after “Petitioner.” Write your spouse’s name after “Respondent.” Spouse means husband or wife.
- 4** Check one box. “Dissolution of marriage” means divorce. “Legal Separation” means the parties will not live together, but the marriage will not end. “Nullity of marriage” means annulment.
- 5** You must have lived in California for the past 6 months, and in Fresno County for the past 3 months, to file this petition in Fresno County. Check Petitioner.
- 6** Write the date of your marriage (a), the date you separated (b), and how many years and months between the marriage and separation. (Letter (c))
- 7** If you have no children with your spouse, check box a. If you and your spouse have children, check b. List their names, birthdays, ages, and if a male or female. If you need more space, check “Continued on Attachment 3b.” Use another piece of paper and write Attachment 3b on it.
- 8** “Separate property” means things bought before the marriage or after the husband and wife separated. Debts (money owed) can also be separate property. Check “below” and list separate property under Item. Write Petitioner or Respondent under Confirm to. If you need more space check “in Attachment 4.” Use another piece of paper and write Attachment 4 on it. Or you can use a property declaration to list the property. Check “in Property Declaration” and attach form FL-160.

# PETITION (FL-100)

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## DIRECTIONS:

- Find a number on the sample form  
*Example:* 10
- Go to the same number below to find out how to fill out the form
- Type or print in blue or black ink
- If you know the CASE NUMBER fill it in. If not known, leave it blank.

MARRIAGE OF: (last name, first name of parties): <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto; text-align: center; font-weight: bold;">9</div>	CASE NUMBER: <div style="border: 1px solid black; width: 100%; height: 20px;"></div>
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**10** DECLARATION REGARDING COMMUNITY AND QUASI-COMMUNITY ASSETS AND DEBTS AS CURRENTLY KNOWN

a. ☐ There are no such assets or debts subject to disposition by the court in this proceeding.  
 b. ☐ All such assets and debts have been disposed of by written agreement.  
 c. ☐ All such assets and debts are listed ☐ in Attachment 5c ☐ below (specify):

**11** 6. **Petitioner requests**

a. ☐ Dissolution of the marriage based on  
     (1) ☐ irreconcilable differences. Fam. Code, § 2310(a)  
     (2) ☐ incurable insanity. Fam. Code, § 2310(b)  
 b. ☐ Legal separation of the parties based on  
     (1) ☐ irreconcilable differences. Fam. Code, § 2310(a)  
     (2) ☐ incurable insanity. Fam. Code, § 2310(b)  
 c. ☐ Nullity of void marriage based on  
     (1) ☐ incestuous marriage. Fam. Code, § 2200  
     (2) ☐ bigamous marriage. Fam. Code, § 2201  
 d. ☐ Nullity of voidable marriage based on  
     (1) ☐ Petitioner's age at time of marriage. Fam. Code, § 2210(a)  
     (2) ☐ prior existing marriage. Fam. Code, § 2210(b)  
     (3) ☐ unsound mind. Fam. Code, § 2210(c)  
     (4) ☐ fraud. Fam. Code, § 2210(d)  
     (5) ☐ force. Fam. Code, § 2210(e)  
     (6) ☐ physical incapacity. Fam. Code, § 2210(f)

**12** 7. **Petitioner requests** that the court grant the above relief and make injunctive (including restraining) and other orders as follows:

	Petitioner	Respondent	Joint	Other
a. Legal custody of children to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Physical custody of children to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Child visitation be granted to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(1) <input type="checkbox"/> Supervised for	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) <input type="checkbox"/> No visitation for	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) <input type="checkbox"/> Continued on Attachment 7c(3)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. <input type="checkbox"/> Determination of parentage of any children born to the Petitioner and Respondent prior to the marriage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. <input type="checkbox"/> Spousal support payable to (earnings assignment will be issued).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. <input type="checkbox"/> Attorney fees and costs payable by	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. <input type="checkbox"/> Terminate the court's jurisdiction (ability) to award spousal support to Respondent.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. <input type="checkbox"/> Property rights be determined.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. <input type="checkbox"/> Petitioner's former name be restored (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. <input type="checkbox"/> Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Continued on Attachment 7j.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**13** 8. If there are minor children born to or adopted by the Petitioner and Respondent before or during this marriage, the court will make orders for the support of the children. An earnings assignment will be issued without further notice.

**13** 9. **I HAVE READ THE RESTRAINING ORDERS ON THE BACK OF THE SUMMONS, AND I UNDERSTAND THAT THEY APPLY TO ME WHEN THIS PETITION IS FILED.**

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(TYPE OR PRINT NAME) <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto; text-align: center; font-weight: bold;">14</div>	(SIGNATURE OF PETITIONER) <div style="border: 1px solid black; width: 100%; height: 20px;"></div>
Date: <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto; text-align: center; font-weight: bold;">15</div>	(SIGNATURE OF ATTORNEY FOR PETITIONER) <div style="border: 1px solid black; width: 100%; height: 20px;"></div>

**NOTICE:** Dissolution or legal separation may automatically cancel the rights of a spouse under the other spouse's will, trust, retirement benefit plan, power of attorney, pay on death bank account, transfer on death vehicle registration, survivorship rights to any property owned in joint tenancy, and any other similar thing. It does not automatically cancel the right of a spouse as beneficiary of the other spouse's life insurance policy. You should review these matters, as well as any credit cards, other credit accounts, insurance policies, retirement benefit plans, and credit reports to determine whether they should be changed or whether you should take any other actions. However, some changes may require the agreement of your spouse or a court order (see Family Code sections 231-235).

FL-100 (Rev. January 1, 2003) Page 2 of 2

PETITION  
(Family Law)

**9** Write out first and last names for you and for your spouse.

**10** Check:

- a. if you and your spouse have no assets (property) or debts (money you owe) check box a.
- b. if you and your spouse have assets (property) or debts (money you owe) check box b and,

Write assets and debts in the space provided and check "below" OR check "in Attachment 5c" if you need more space (use another piece of paper and write Attachment 5c at the top) OR check "in Property Declaration" and attach an FL-160 listing the property. List all property and debts you and your spouse got together or alone during the marriage. It does not have to be listed as "joint" property.

**11** Check a. (1) for a divorce. Check b. (1) for a legal separation. Check c. for a Nullity and either (1) or (2).

Check all boxes for what you want the court to decide, but only one box for each line: "Petitioner" (you),

**12** "Respondent" (your spouse), or "Joint" (both share), or "Other".

- For c. you can check either box if you want the other party to visit, or check both boxes if parents are going to share the same amount of time with the child. You may check any of the boxes attach any of the additional forms listed to set out the visitation schedule and restrictions OR check "in Attachment 7c" (use another piece of paper and write Attachment 7c at the top and write out the visitation schedule).
- If you have other items you want the court to decide, write them on a separate piece of paper. Write Attachment 7j at the top of this page.

**13** If you and your spouse have children born or adopted by you both, the court will order child support. You do not need to write anything here.

**14** Type or print your full name to the left; sign your full name to the right. **You must write in the date.**

**15** Leave this blank unless you have an attorney (lawyer).

# How to fill out DECLARATION UNDER UNIFORM CHILD CUSTODY Jurisdiction and Enforcement Act (FL-105/GC-120)

**NOTE: If there are no minor children in your case, you do not need to complete this form.**

## DIRECTIONS:

- ▶ Find the number on the sample form.  
*Example: 1*
- ▶ Go to the same number below to find out how to fill out the blank form.
- ▶ Type or print in black or blue ink.
- ▶ If you have a CASE NUMBER fill it in. If not known, leave it blank.

FL-105/GC-120

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address) <div style="text-align: center;">1</div> TELEPHONE NO.: _____ FAXING NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____		FOR COURT USE ONLY	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF _____ STREET ADDRESS: _____ MAILING ADDRESS: _____ CITY AND ZIP CODE: _____ BRANCH NAME: _____		<div style="text-align: center;">2</div>	
PETITIONER: _____ RESPONDENT: _____ OTHER PARTY: _____ <small>(This section applies only to family law cases.)</small>		<div style="text-align: center;">3</div>	
GUARDIANSHIP OF (Name): _____ <div style="text-align: center;">4</div>		CASE NUMBER: _____	
DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)			

1. I am a party to this proceeding to determine custody of a child.

2. ☐ My present address and the present address of each child residing with me is confidential under Family Code section 3426 as I have indicated in item 6.

3. There are (specify number) 6 minor children who are subject to this proceeding, as follows:  
(Insert the information requested below. The residence information must be given for the last FIVE years.)

Child's name	Period of residence	Address	Person child lived with (name and complete current address)	Relationship
7	11 to present	12 <input type="checkbox"/> Confidential	13 <input type="checkbox"/> Confidential	14
	to	Child's residence (City, State)	Person child lived with (name and complete current address)	
	to	Child's residence (City, State)	Person child lived with (name and complete current address)	
	to	Child's residence (City, State)	Person child lived with (name and complete current address)	
	to	Child's residence (City, State)	Person child lived with (name and complete current address)	
15	<input type="checkbox"/> Residence information is the same as given above for child a. <small>(If NOT the same, provide the information below.)</small>			
	Period of residence	Address	Person child lived with (name and complete current address)	Relationship
	to present	<input type="checkbox"/> Confidential	<input type="checkbox"/> Confidential	
	to	Child's residence (City, State)	Person child lived with (name and complete current address)	
	to	Child's residence (City, State)	Person child lived with (name and complete current address)	
	to	Child's residence (City, State)	Person child lived with (name and complete current address)	
	to	Child's residence (City, State)	Person child lived with (name and complete current address)	

16 ☐ Additional residence information for a child listed in item a or b is continued on attachment 3c.

17 ☐ Additional children are listed on form FL-105(A)/GC-120(A). (Provide all requested information for additional children.)

Form Adopted for Mandatory Use  
Judicial Council of California  
FL-105/GC-120 (Rev. January 1, 2008)

DECLARATION UNDER UNIFORM CHILD CUSTODY  
JURISDICTION AND ENFORCEMENT ACT (UCCJEA)

Family Code, § 3400 et seq.  
Probate Code, §§ 10130, 10132  
www.courtinfo.ca.gov

- 1 Print your name, your mailing address, and telephone number (if any). This info will be available to the other party.
  - 2 If not filled in for you, print "Fresno" after COUNTY OF. The address is: 1130 "O" Street, Fresno, CA 93724.
  - 3 Print the name of the petitioner and respondent. The petitioner is the person who started the case at the beginning.
  - 4 Leave this box blank.
  - 5 If you're alleging domestic violence or child abuse and your address is unknown to the other party, you may mark this box and the "Confidential" boxes under items 12 & 13.
  - 6 Fill in the number of minor children from this relationship (minor children – under age 18).
  - 7 For the oldest child, fill in the first and last name.
  - 8 Fill in the city and state where this child was born.
  - 9 Fill in the child's date of birth (MM/DD/YY).
  - 10 If the child is a boy, write "M" for male. If the child is a girl, write "F" for female.
- For 11 through 14 give information from now to the past 5 years, working backward:**
- 11 The beginning and ending date the child lived at the address (from when to when at that address).
  - 12 For the dates you listed, print the city and state where the child lived.
  - 13 Name of person(s) (adult) the child lives or lived with and the physical addresses.
  - 14 Relationship means how the adult is related to the child. For example, mother or father.
  - 15 If you have only one child from this relationship, leave this section blank. If you have a second child, follow the instructions from 7 to 10. If the second child has always resided with the first child, check the box below the second child's name ("Resident information is the same ..."). If you check this box you do not have to complete the boxes below. If the addresses for the second child are different from the first child, then follow the instructions from 11 to 14.
  - 16 If you need additional space for more addresses, mark box "c." At the top of a sheet of paper, print "Attachment 3c" and print the additional information.
  - 17 If you have more than two children from this relationship, mark box "d" and complete form FL-105(A)/GC120(A).

FL-105/GC-120

SHORT TITLE	CASE NUMBER
-------------	-------------

18 4. Do you have information about, or have you participated as a party or as a witness or in some other capacity in, another court case or custody or visitation proceeding, in California or elsewhere, concerning a child subject to this proceeding?  
☐ Yes ☐ No (If yes, attach a copy of the orders (if you have one) and provide the following information):

Proceeding	Case number	Court (name, state, location)	Court order or judgment (date)	Name of each child	Your connection to the case	Case status
a. <input type="checkbox"/> Family						
b. <input type="checkbox"/> Guardianship						
c. <input type="checkbox"/> Other						

Proceeding	Case Number	Court (name, state, location)
d. <input type="checkbox"/> Juvenile Delinquency/Juvenile Dependency		
e. <input type="checkbox"/> Adoption		

20 5. ☐ One or more domestic violence restraining/protective orders are now in effect. (Attach a copy of the orders if you have one and provide the following information):

Court	County	State	Case number (if known)	Orders expire (date)
21 <input type="checkbox"/> Criminal				
b. <input type="checkbox"/> Family				
c. <input type="checkbox"/> Juvenile Delinquency/Juvenile Dependency				
d. <input type="checkbox"/> Other				

22 6. Do you know of any person who is not a party to this proceeding who has physical custody or claims to have custody of or visitation rights with any child in this case? ☐ Yes ☐ No (If yes, provide the following information):

a. Name and address of person	b. Name and address of person	c. Name and address of person
23 <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights	<input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights	<input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights
Name of each child	Name of each child	Name of each child

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.  
 Date: 24 \_\_\_\_\_

(TYPE OR PRINT NAME) (SIGNATURE OF DECLARANT)

25 ☐ Number of pages attached: \_\_\_\_\_

NOTICE TO DECLARANT: You have a continuing duty to inform this court if you obtain any information about a custody proceeding in a California court or any other court concerning a child subject to this proceeding.

FL-105/GC-120 (Rev. January 1, 2006) DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA) Page 2 of 2

## DECLARATION (FL-105/GC-120)

- Page two -

### DIRECTIONS:

- ▶ Find the number on the sample form.  
*Example:* 18
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in blue or black ink.
- ▶ If you have a CASE NUMBER fill it in. If not known, leave it blank.

- 18 If there are no other cases regarding custody or visitation of the children in this case (in California or anywhere else), mark the "No" box and skip to step 20. If you have information regarding another case involving any of the children in this case, mark the "Yes" box.
- 19 If you check yes, mark the box next to the type of other case; the case number; the court's name, county, and state. Next, write the date of the order, name of each child involved in the other case, how you are involved, and what is now happening in that case.
- 20 If there is no current protective order (a restraining order) in effect, skip to 22. Check this box only if there is a current (not expired) restraining order or protective order involving you or the children, and attach a copy of the order(s).
- 21 If you checked this box, mark the box that describes the type of court that gave the restraining order and give the county, state, case number, and the date the orders expire.
- 22 If the child(ren) in this case live with either the mother or the father and there is no one else that claims to have custody or visitation rights to the child(ren), mark the "No" box and skip to step 24.
- 23 If the child(ren) is/are not living with one of the parents (either father or mother), and that other person thinks s/he has custody or visitation rights with the child(ren), mark the "yes" box. Then print that person's name and address. Mark the box that describes what that person has, or claims to have, and the child(ren)'s name(s) involved in this case.
- 24 Date, and print your name (first, middle, last) on the line to the left, sign your name on the right next to the arrow.
- 25 If you are going to attach any additional pages to give more information, print the number of pages that will follow this one.



## How to fill out

# DECLARATION OF DISCLOSURE (FL-140)

## DIRECTIONS

- Find the number on the sample form. *Example:* ①
- Go to the same number below to find out how to fill out the form.
- Type or print in blue or black ink
- If you know the CASE NUMBER fill it in. If not known leave it blank.

<small>ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address):</small> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <div style="text-align: right;"><small>TELEPHONE NO.:</small> <div style="border: 1px solid black; height: 20px; width: 100%;"></div></div>		<b>FL-140</b>
<small>ATTORNEY FOR (Name):</small> <b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b>		
<small>STREET ADDRESS:</small> <small>MAILING ADDRESS:</small> <small>CITY AND ZIP CODE:</small> <small>BRANCH NAME:</small>		
<small>PETITIONER:</small> <small>RESPONDENT:</small>		
<div style="border: 1px solid black; padding: 5px;"><b>DECLARATION OF DISCLOSURE</b> <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Petitioner's <input type="checkbox"/> Respondent's</div><div><input type="checkbox"/> Preliminary <input type="checkbox"/> Final</div></div></div>		<small>CASE NUMBER:</small> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>

**DO NOT FILE WITH THE COURT**

Both the preliminary and the final declaration of disclosure must be served on the other party with certain exceptions. Neither disclosure is filed with the court. A declaration stating service was made of the final declaration of disclosure must be filed with the court (see form FL-141).

A preliminary declaration of disclosure but not a final declaration of disclosure is required in the case of a summary dissolution (see Family Code section 2109) or in a default judgment (see Family Code section 2110) provided the default is not a stipulated judgment or a judgment based upon a marriage settlement agreement.

A declaration of disclosure is required in a nullity or legal separation action as well as in a dissolution action.

**Attached are the following:**

- 1 ☐ A completed Schedule of Assets and Debts (form FL-142).
- 2 ☐ A completed Income and Expense Declaration (form FL-150 (as applicable)).
- 3 ☐ A statement of all material facts and information regarding valuation of all assets that are community property or in which the community has an interest (*not a form*).
- 4 ☐ A statement of all material facts and information regarding obligations for which the community is liable (*not a form*).
- 5 ☐ An accurate and complete written disclosure of any investment opportunity, business opportunity, or other income-producing opportunity presented since the date of separation that results from any investment, significant business, or other income-producing opportunity from the date of marriage to the date of separation (*not a form*).

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(TYPE OR PRINT NAME)

(SIGNATURE)

Form Adopted for Mandatory Use  
Judicial Council of California  
FL-140 (Rev. January 1, 2003)

**DECLARATION OF DISCLOSURE**  
(Family Law)

Page 1 of 1  
Family Code, §§ 2102, 2104, 2105,  
2106, 2112  
www.courtinfo.ca.gov

- ① Write your name, address and phone number.
- ② If not filled in for you, write “Fresno” after COUNTY OF. The address is: 1130 "O" Street, Fresno CA 93724-2201. The Branch Name is: B.F. Sisk Courthouse.
- ③ Write the name of the Petitioner and Respondent. The Petitioner is the party that starts the case against another person, the Respondent.
- ④ Check the box that identifies you as the Petitioner or Respondent. Check “Preliminary.”
- ⑤ This form is part of the both the Starting Your Divorce Packet and Preliminary Declaration of Disclosure (PDD) Packet. The PDD Packet (Preliminary Declaration of Disclosure, Schedule of Assets and Debts, and Income and Expense Declaration) must be filled out completely one time and served (delivered) on the other party. *The Preliminary Declaration of Disclosure does not get filed with the court.*
- ⑥
  - Read this section carefully. Check boxes 1 and 2.
  - Check box 3 and attach another page that lists assets (property, belongings, debts, etc.) owned by you and your spouse. Include the value of the assets (how much it’s worth).
  - Check box 4 if you are attaching another page that describes any assets for which you and your spouse are responsible. Include the value.
  - If any investment opportunities were made to you since you and your spouse separated, check box 5 and attach another page and describe the opportunities. (*Example: If you have bought or sold a home or business, invested income or sold items from investments.*)
- ⑦ Date the form. Type or print your name on the left, and sign on the right.  
DIV-07 R01-05

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address): <div style="border: 1px solid black; width: 100px; height: 30px; margin: 5px 0;"></div> ATTORNEY FOR (Name): <div style="border: 1px solid black; width: 100px; height: 30px; margin: 5px 0;"></div>	TELEPHONE NO.: <div style="border: 1px solid black; width: 100px; height: 30px; margin: 5px 0;"></div>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF FRESNO</b> 1100 Van Ness Avenue - Fresno, California 93724-0002	
PETITIONER: <div style="border: 1px solid black; width: 100px; height: 30px; margin: 5px 0;"></div>	
RESPONDENT: <div style="border: 1px solid black; width: 100px; height: 30px; margin: 5px 0;"></div>	
<b>SCHEDULE OF ASSETS AND DEBTS</b> <input type="checkbox"/> Petitioner's <input type="checkbox"/> Respondent's	
CASE NUMBER: <div style="border: 1px solid black; width: 100px; height: 30px; margin: 5px 0;"></div>	

## — INSTRUCTIONS —

List all your known community and separate assets or debts. Include assets even if they are in the possession of another person, including your spouse. If you contend an asset or debt is separate, put P (for Petitioner) or R (for Respondent) in the first column (separate property) to indicate to whom you contend it belongs.

All values should be as of the date of signing the declaration unless you specify a different valuation date with the description. For additional space, use a continuation sheet numbered to show which item is being continued.

ITEM NO.	ASSETS DESCRIPTION	SEP. PROP.	DATE ACQUIRED	CURRENT GROSS FAIR MARKET VALUE	AMOUNT OF MONEY OWED OR ENCUMBRANCE
1.	REAL ESTATE (Give street addresses and attach copies of deeds with legal descriptions and latest lender's statement.)			\$	\$
2.	HOUSEHOLD FURNITURE, FURNISHINGS, APPLIANCES (identify.)				
3.	JEWELRY, ANTIQUES, ART, COIN COLLECTIONS, etc. (identify.)				

Form Approved for Optional Use  
Judicial Council of California  
FL-142 (Rev. January 1, 2005)

**SCHEDULE OF ASSETS AND DEBTS**  
(Family Law)

Page 1 of 4  
Code of Civil Procedure, §§ 2030(c), 2032.5  
www.courtinfo.ca.gov

*How to fill out*

## SCHEDULE OF ASSETS AND DEBTS (FL-142)

### DIRECTIONS

- ▶ Find the number on the sample form.  
*Example: 1*
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in black ink
- ▶ If you know the CASE NUMBER fill it in. If not known, leave it blank.

- 1 Write your name, address and phone number.
- 2 Write "Fresno" after Superior Court of California, County of.
- 3 Write the name of the Petitioner and Respondent. The Petitioner is the party that starts the case against another person, the Respondent.
- 4 Check the box that identifies you as the Petitioner or Respondent.
- 5 Read the instructions carefully. "Separate property" is assets (things of value) or debts (money owed) that belongs to the husband or wife, but not both. "Community" assets or debts belong to the husband and wife together.
  - If separate property, you will put H or W in the first column. Leave blank if community.
  - You will write the date the asset was acquired (purchased) in the second column
  - *Current gross fair market value*: gross means before taxes are taken out. Fair market value means how much the item is worth (fill in a dollar amount).
  - If money is still owed on this item, you will write this amount in the last column.

*For each item listed on this form, if you need more space, attach another piece of paper (a continuation sheet) and number the page the same number as the item on the form. Example: #1 for Real Estate, #2 for Household Furniture, #3 for Jewelry, Antiques, Art, Coin Collections, etc. Do this as needed for all four pages of this form.*

- 6 List all real estate (land, buildings), including addresses. Attach copies of deeds, etc. as requested.
- 7 List all household furniture, furnishings, and appliances: Examples: sofas, lamps, televisions, computers, etc.
- 8 List all jewelry, antiques, art, coin collections. Note: these items should be appraised (given a dollar value by someone in that business).

# SCHEDULE OF ASSETS AND DEBTS (FL-142)

- page two -

## DIRECTIONS

- ▶ Find the number on the sample form.  
*Example:* 12
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in blue or black ink.
- ▶ If you know the CASE NUMBER fill it in. If not known, leave it blank.

ITEM NO.	ASSETS DESCRIPTION	SEP. PROP.	DATE ACQUIRED	CURRENT GROSS FAIR MARKET VALUE	AMOUNT OF MONEY OWED OR ENCUMBRANCE
	4. VEHICLES, BOATS, TRAILERS <i>(Describe and attach copy of title document.)</i>			\$	\$
9					
	5. SAVINGS ACCOUNTS <i>(Account name, account number, bank, and branch. Attach copy of latest statement.)</i>				
10					
	6. CHECKING ACCOUNTS <i>(Account name and number, bank, and branch. Attach copy of latest statement.)</i>				
11					
	7. CREDIT UNION, OTHER DEPOSIT ACCOUNTS <i>(Account name and number, bank, and branch. Attach copy of latest statement.)</i>				
12					
	8. CASH <i>(Give location.)</i>				
13					
	9. TAX REFUND				
14					
	10. LIFE INSURANCE WITH CASH SURRENDER OR LOAN VALUE <i>(Attach copy of declaration page for each policy.)</i>				
15					

FL-142 (Rev. January 1, 2005)

SCHEDULE OF ASSETS AND DEBTS  
(Family Law)

Page 2 of 4

- 9 List all vehicles such as cars, motorcycles, boats, and trailers. Attach copies of documents that show they belong to you and/or your spouse. Example: DMV registration
- 10 For Savings Accounts, include account numbers, and the bank name and branch (Example: Bank of America, Fashion Fair). Include copies of latest statements for each account.
- 11 Provide the same information as above for Checking Accounts.
- 12 Provide the same information as above for Credit Union or similar accounts.
- 13 If you have stored cash somewhere, write the location in the space provided.
- 14 If you received a tax refund this year, provide that information. Otherwise leave blank.
- 15 Provide Life Insurance information with the amount it is worth if you turned it in, or the loan amount. Attach a copy of the policy's declaration page.

# SCHEDULE OF ASSETS AND DEBTS (FL-142)

- page three -

## DIRECTIONS

- ▶ Find the number on the sample form.  
*Example:* 16
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in blue or black ink.
- ▶ If you know the CASE NUMBER fill it in. If not known, leave it blank.

ITEM NO.	ASSETS DESCRIPTION	SEP. PROP.	DATE ACQUIRED	CURRENT GROSS FAIR MARKET VALUE	AMOUNT OF MONEY OWED OR ENCUMBRANCE
11.	STOCKS, BONDS, SECURED NOTES, MUTUAL FUNDS <small>(Give certificate number and attach copy of the certificate or copy of latest statement.)</small>			\$	\$
12.	RETIREMENT AND PENSIONS <small>(Attach copy of latest summary plan documents and latest benefit statement.)</small>				
13.	PROFIT - SHARING, ANNUITIES, IRAS, DEFERRED COMPENSATION <small>(Attach copy of latest statement.)</small>				
14.	ACCOUNTS RECEIVABLE AND UNSECURED NOTES <small>(Attach copy of each.)</small>				
15.	PARTNERSHIPS AND OTHER BUSINESS INTERESTS <small>(Attach copy of most current K-1 form and Schedule C.)</small>				
16.	OTHER ASSETS				
17.	TOTAL ASSETS FROM CONTINUATION SHEET			\$	\$
18.	TOTAL ASSETS			\$	\$

- 16 If you or your spouse has stocks, bonds, secured notes, and/or mutual funds, list them here. Write the certificate/account number for each. Use a extra (continuation) sheet if needed. Attach copies of certificates and/or most recent statements.
- 17 List retirement funds and pensions. Attach a copy of the most recent summary page or statement.
- 18 If you or your spouse participates in any of the following, list them here. Attach copies of statements.
  - Profit-sharing plans through workplace
  - Annuities – amounts payable on a yearly basis, or at other regular times
  - Individual retirement accounts (IRA)
  - Deferred compensation – wages that are not taken now, but is paid later
- 19 If you or your spouse is due to receive any money, list accounts receivable here. Also list any unsecured notes (not secured by real property) you may have. Attach copies.
- 20 If you or your spouse has a business partnership or other kind of business, list information here. Attach copies of the most recent *K-1 form* and *schedule C* (IRS forms).
- 21 List any other assets you or your spouse might have. Use extra sheets as necessary.
- 22 If you used extra continuation sheets, add up all amounts and list them here.
- 23 Add up your total assets from all pages of form FL-142, (1-17) and fill in the amount on line 18. Continue on the back side to list your debts.

# SCHEDULE OF ASSETS AND DEBTS (FL-142)

- page four -

## DIRECTIONS

- Find the number on the sample form.  
*Example:* 25
- Go to the same number below to find out how to fill out the form.
- Type or print in blue or black ink.
- If you know the CASE NUMBER fill it in. If not known, leave it blank.

ITEM NO.	DEBTS—SHOW TO WHOM OWED	SEP. PROP.	TOTAL OWING	DATE INCURRED
19.	STUDENT LOANS (Give details.) 24		\$	
20.	TAXES (Give details.) 25			
21.	SUPPORT ARREARAGES (Attach copies of orders and statements.) 26			
22.	LOANS—UNSECURED (Give bank name and loan number and attach copy of latest statement.) 27			
23.	CREDIT CARDS (Give creditor's name and address and the account number. Attach copy of latest statement.) 28			
24.	OTHER DEBTS (Specify): 29			
25.	TOTAL DEBTS FROM CONTINUATION SHEET 30			
26.	TOTAL DEBTS 31		\$	

27. ☐ (Specify number) \_\_\_\_\_ pages are attached as continuation sheets.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

\_\_\_\_\_  
(TYPE OR PRINT NAME) 33 (SIGNATURE OF DECLARANT)

FL-142 (Rev. January 1, 2006)

SCHEDULE OF ASSETS AND DEBTS  
(Family Law)

Page 4 of 4

*List all debts (money owed). In the first column, put a **W** or **H** to show that the debt is separate property. In the second column, write the total amount of money still owed. In the last column, put the date the debt started. Use continuation sheets as needed.*

- 24 If you or your spouse currently have any student loans, list the details here.
- 25 If you or your spouse owes money for taxes, list details here.
- 26 Support arrearages means being behind in payments ordered by the court, such as child support or spousal support. If either you or your spouse is behind in support payments, attach copies of court orders and statements.
- 27 Unsecured loans are those that are not guaranteed or protected. If you or your spouse have unsecured loans, list them here. Write the name of the bank and the loan number. Attach copies of most recent statements.
- 28 List all credit cards. Write the name, address and account number for each creditor (company that issued the credit card). Attach copies of most recent statements.
- 29 List any other debts owed by you or your spouse.
- 30 If you used extra sheets, add up all amounts and list them here.
- 31 Add up your total debts (19-25) and fill in the amount.
- 32 If you used continuation sheets, check the box and write the number of continuation sheets you are attaching (not copies of statements or other attachments).
- 33 Date the form. Type or print your name on the left. Sign your name on the right.

## How to fill out

# INCOME AND EXPENSE DECLARATION (FL-150)

## DIRECTIONS

- ▶ Find the number on the sample form. *Example:* ①
- ▶ Go to the same number below to find out how to fill out the form.
- ▶ Type or print in blue or black ink
- ▶ If you know the CASE NUMBER fill it in. If not known leave it blank.

A sample form titled 'INCOME AND EXPENSE DECLARATION (FL-150)'. The form is divided into several sections, each numbered with a circled number from 1 to 8. Section 1 is at the top left, containing fields for name, address, and phone number. Section 2 is below section 1, containing fields for county, case number, and branch name. Section 3 is below section 2, containing fields for petitioner/plaintiff and respondent/defendant names. Section 4 is on the right side, containing fields for job information: name of employer, address, phone, job title, date started/ended, hours per week, and gross pay. Section 5 is below section 4, containing fields for education: age, high school status, last grade, college classes, and other education. Section 6 is on the left side, containing fields for tax information: tax year, filing status, state, and number of exemptions. Section 7 is below section 6, containing fields for the total amount the other person makes in a month and an explanation. Section 8 is at the bottom, containing fields for the date, name, and signature.

- ① Print your name, address and phone number.
- ② If not filled in for you, write "Fresno" after COUNTY OF. The address is: 1130 "O" Street, Fresno CA 93724-2201. The Branch Name is: B.F. Sisk Courthouse.
- ③ Fill in the names of the Petitioner/Plaintiff and Respondent/Defendant. (The Plaintiff is the person that starts a case against another person, the Defendant.) Fill in name(s) of Other Parent/Claimant if it applies to this case.
- ④ Fill in information about your job. If you don't have a job, fill in information about **your last job**. If you have more than one job, use another sheet of paper and write the information requested for each additional job.
  - Fill in the name (a) of where you work, the address (b) and phone (c), and your job title (d), example: driver.
  - Fill in the date you started this job (e). If you are unemployed, write the date your job ended (f), how many hours you work(ed) every week (g), and how much money you get paid before taxes are taken out (h). Check the first box if this is a monthly amount, the second box if weekly, or the third box if hourly.
  - Be sure to include **copies of your pay stubs** for the last two months. Use a **dark marker** to cross out your social security number.
- ⑤ Fill in your age (a) and check the "Yes" box if you finished high school (b). If you check No, fill in the last grade you finished. Fill out (c). or (d) if you have taken college classes. Fill out (e) if this applies to you.
- ⑥ Check box (a) and fill in the year of your last tax return. For (b), check the box that applies to you. For (c), check California OR check "Other" if you last filed taxes in another state, and write the state's name. For (d), write the number of "exemptions" you claim when filing your taxes.
- ⑦ Write down the total amount the other person in this case makes in a month, and explain how you know this.
- ⑧ Fill in the date, type or print your name on the left, and sign on the right.

# INCOME AND EXPENSE DECLARATION (FL-150)

- page two -

## DIRECTIONS:

- ▶ Find a number on the sample form  
*Example:* 9
- ▶ Go to the same number below to find out how to fill out the form
- ▶ Type or print in blue or black ink
- ▶ If you know the CASE NUMBER fill it in. If not known leave it blank.

- 9 Print out first and last names for you and the other person(s) in this case.

*Include your pay stubs for the last two months with this form. Also include proof of any other money you make. Bring a copy of your last federal tax return with you to the court hearing. Use a black marker to cross out social security numbers.*

- 10 Fill out a. through k. if it applies to you, and check any boxes that apply to you. The first column is for money earned last month. For the second column, add up amounts for the past 12 months then divide by 12 to get the average amount.
- 11 If you have investments, fill in amounts. If you fill in an amount for d., write a description. If you have property, include a separate page that lists total money earned on the property and expenses.
- 12 Fill out this section only if you are self-employed (own a business). Include a "profit and loss statement" for each business, or a schedule C from your tax return.
- 13
- Check "Additional Income," if you received extra money in the last 12 months. Write down the amount and where the money came from. Examples: "I won the lottery." "My uncle left me money in his will."
  - Check "Change in Income," if the amount of money you normally receive has changed a lot during the past 12 months. Write down the reason. Examples: "I got hurt on the job and am now on disability." "I got a new job that pays better than my old one."
- 14 Fill in amounts deducted (taken away) from your earnings last month. Fill out all that apply. If you fill out (f), you must write an explanation on a separate page labeled "Question 10f."
- 15 List your assets (accounts, stocks and bonds, property, etc.). Put in the total value (worth) for each line listed.

# INCOME AND EXPENSE DECLARATION (FL-150)

- page three -

## DIRECTIONS:

- ▶ Find a number on the sample form  
*Example:* 16
- ▶ Go to the same number below to find out how to fill out the form
- ▶ Type or print in blue or black ink
- ▶ If you know the CASE NUMBER fill it in. If not known leave it blank.

- 16 Print out first and last names for you and the other person(s) in this case.
- 17 Give information about all persons who live with you.
- Write their names, ages, and how they are related to you (parent, child, other relative, friend).
  - Write how much money each person receives each month (before taxes), and check the Yes or No box if this person pays some of the living expenses.
- 18 For **Average monthly expenses**, check the first box if you are estimating (best guess) expenses, or the second box if actual (exact) expenses. Check third box only if you expect these to be your expenses each month.
- For a., check first box if you rent or the second box if you own your home. Fill in monthly payment. If you have a mortgage, fill out (1), (2) and (3). Fill out (4) and (5) if it applies to you.
  - Fill in amounts for b. through q. as they apply to you.
  - For j. and q., describe the expense.
  - Add lines a. through q., but don't add in mortgage principal and interest from line (a) (2).
  - Put this amount in the total expenses box, line r.
  - Line s. is monthly expenses for the household NOT paid by you.
- 19 List all installment payments and debts you may have. This could include car payments, credit card payments, etc.
- First column: fill in the name of the creditor (who gets the payment?).
  - Second column: describe what the payment is for. Third column: amount of last payment to the creditor
  - Fourth column: amount still owed. Last column: date last payment was made.
- 20 If you are represented by an attorney or you have paid money to an attorney, complete this section. If you have not paid any money to an attorney in this case, leave this section blank.
- 21 Do not fill out this section. Skip to next page....

# INCOME AND EXPENSE DECLARATION (FL-150)

- page four -

## DIRECTIONS:

- ▶ Find a number on the sample form  
*Example:* 22
- ▶ Go to the same number below to find out how to fill out the form
- ▶ Type or print in blue or black ink
- ▶ If you know the CASE NUMBER fill it in. If not known leave it blank.

The image shows a sample form for the Income and Expense Declaration (FL-150). The form is divided into several numbered sections, each with a corresponding number in a circle. The sections are:

- 22**: Print out first and last names for you and the other person(s) in this case.
- 23**: Fill in the number of children you have with the other parent that are under age 18.
- 24**: Check the first box if your work place provides health insurance for your children. Otherwise, check the second box. Write the name and address of this insurance company in the space provided. Fill in monthly amount you pay (or would pay to fully cover the children) for health insurance. DO NOT include costs already paid by your job.
- 25**: Fill in monthly amounts that apply to your case. Describe educational or special needs.
- 26**: List any "special hardships" (things that make daily living hard).
- 27**: In the space provided you may write other information you want the court to know about your case.
- 28**: (This section is partially visible at the bottom of the form.)

**22** Print out first and last names for you and the other person(s) in this case.

*Fill out the rest of this page only if your case involves child support.*

**23** Fill in the number of children you have with the other parent that are **under age 18**.

- Estimate the amount of time the children are with you and with the other parent. Example: "The children are with me 30% of the time and with the other parent 70% of the time."
- If unsure about using percentages, use the space provided to describe the parents' schedules for taking care of the children.

**24** Check the first box if your work place provides health insurance for your children. Otherwise, check the second box. Write the name and address of this insurance company in the space provided. Fill in monthly amount you pay (or would pay to fully cover the children) for health insurance. DO NOT include costs already paid by your job.

**25** Fill in monthly amounts that apply to your case. Describe educational or special needs.

**26** List any "special hardships" (things that make daily living hard).

- For a. through c., fill in monthly amounts that apply.
- In the second column, fill in the number of months the situation has lasted
- If you have children under age 18 from other relationships, list their names and ages in the space provided.
- If you get child support for these children, fill in that amount.
- If you fill out lines a., b., and c., space has been provided to explain why it's hard for you to pay expenses.

**27** In the space provided you may write other information you want the court to know about your case.

## RESPONSE (FL-120)

## DIRECTIONS

- **Leave this blank.**  
**Respondent fills out this form.**

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):		FL-120
TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY	
<b>SUPERIOR COURT OF CALIFORNIA • COUNTY OF FRESNO</b> 1100 Van Ness Avenue Fresno, California 93724-0002		
<b>MARRIAGE OF</b> PETITIONER _____ RESPONDENT _____	CASE NUMBER _____	
<b>RESPONSE <input type="checkbox"/> and REQUEST FOR</b> <input type="checkbox"/> Dissolution of Marriage <input type="checkbox"/> Legal Separation <input type="checkbox"/> Nullity of Marriage <span style="float: right;"><input type="checkbox"/> AMENDED</span>		
<p>1. <b>RESIDENCE</b> (Dissolution only) <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent has been a resident of this state for at least six months and of this county for at least three months immediately preceding the filing of the <i>Petition for Dissolution of Marriage</i>.</p> <p>2. <b>STATISTICAL FACTS</b></p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">           a. Date of marriage: _____            b. Date of separation: _____         </div> <div style="width: 45%;">           c. Time from date of marriage to date of separation (specify):            Years: _____ Months: _____         </div> </div> <p>3. <b>DECLARATION REGARDING MINOR CHILDREN</b> (include children of this relationship born prior to or during the marriage or adopted (during the marriage)).</p> <div style="display: flex;"> <div style="width: 40%;">           a. <input type="checkbox"/> There are no minor children.            b. <input type="checkbox"/> The minor children are:  <u>Child's name</u> </div> <div style="width: 30%; text-align: center;"> <u>Birthdate</u> </div> <div style="width: 15%; text-align: center;"> <u>Age</u> </div> <div style="width: 15%; text-align: center;"> <u>Sex</u> </div> </div> <p style="margin-top: 10px;"><input type="checkbox"/> Continued on Attachment 3b.</p> <p>c. If there are minor children of the Petitioner and Respondent, a completed <i>Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)</i> (form FL-105) must be attached.</p> <p>d. <input type="checkbox"/> A completed voluntary declaration of paternity regarding minor children born to the Petitioner and Respondent prior to the marriage is attached.</p> <p>4. <b>SEPARATE PROPERTY</b>          Respondent requests that the assets and debts listed <input type="checkbox"/> in <i>Property Declaration</i> (form FL-160) <input type="checkbox"/> in Attachment 4 <input type="checkbox"/> below be confirmed as separate property. <span style="float: right;"><u>Continued to</u></span></p> <p><u>Item</u></p>		
<b>NOTICE:</b> You may redact (black out) social security numbers from any written material filed with the court in this case other than a form used to collect child or spousal support.		

Form Adopted for Mandatory Use  
 Judicial Council of California  
 FL-120 (Rev. January 1, 2010)

**RESPONSE—MARRIAGE**  
 (Family Law)

Page 1 of 2  
 Family Code, § 2400  
 www.courtinfo.ca.gov

**Leave this form blank.** This form is served on Respondent. Respondent fills out this form.

How to fill out

## PROOF OF SERVICE OF SUMMONS (FL-115)

### DIRECTIONS

- Find the number on the sample form.
- Go to the same number below to find out how to fill out the form.
- Type or print in blue or black ink.
- Fill in the CASE NUMBER.

<small>ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):</small>		<small>FL-115</small>	
<small>TELEPHONE NO.:</small> <b>1</b> <small>FAX NO. (Optional):</small>		<b>FOR COURT USE ONLY</b>	
<small>E-MAIL ADDRESS (Optional):</small>			
<small>ATTORNEY FOR (Name):</small>			
<b>2</b> <b>SUPERIOR COURT OF CALIFORNIA • COUNTY OF FRESNO</b> 1100 Van Ness Avenue Fresno, California 93724-0002			
<small>PETITIONER:</small> <b>3</b>			
<small>RESPONDENT:</small>			
<b>PROOF OF SERVICE OF SUMMONS</b>		<small>CASE NUMBER:</small>	

1. At the time of service I was at least 18 years of age and not a party to this action. I served the respondent with copies of:
- 4** a. ☐ Family Law: *Petition* (form FL-100), *Summons* (form FL-110), and blank *Response* (form FL-120) —or—
- b. ☐ Family Law—Domestic Partnership: *Petition—Domestic Partnership* (form FL-103), *Summons* (form FL-110), and blank *Response—Domestic Partnership* (form FL-123) —or—
- c. ☐ Uniform Parentage: *Petition to Establish Parental Relationship* (form FL-200), *Summons* (form FL-210), and blank *Response to Petition to Establish Parental Relationship* (form FL-220) —or—
- d. ☐ Custody and Support: *Petition for Custody and Support of Minor Children* (form FL-260), *Summons* (form FL-210), and blank *Response to Petition for Custody and Support of Minor Children* (form FL-270)
- and
- 5** e. ☐ (1) ☐ Completed and blank *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act* (form FL-105) (5) ☐ Completed and blank *Financial Statement (Simplified)* (form FL-155)
- (2) ☐ Completed and blank *Declaration of Disclosure* (form FL-140) (6) ☐ Completed and blank *Property Declaration* (form FL-160)
- (3) ☐ Completed and blank *Schedule of Assets and Debts* (form FL-142) (7) ☐ *Order to Show Cause* (form FL-300), *Application for Order and Supporting Declaration* (form FL-310), and blank *Responsive Declaration to Order to Show Cause or Notice of Motion* (form FL-320)
- (4) ☐ Completed and blank *Income and Expense Declaration* (form FL-150) (8) ☐ Other (specify):
2. Address where respondent was served: **6**
3. I served the respondent by the following means (check proper box):
- 7** a. ☐ Personal service. I personally delivered the copies to the respondent (Code Civ. Proc., § 415.10) on (date): at (time):
- b. ☐ Substituted service. I left the copies with or in the presence of (name): who is (specify title or relationship to respondent):
- (1) ☐ (Business) a person at least 18 years of age who was apparently in charge at the office or usual place of business of the respondent. I informed him or her of the general nature of the papers
- (2) ☐ (Home) a competent member of the household (at least 18 years of age) at the home of the respondent. I informed him or her of the general nature of the papers

Form Approved for Optional Use  
Judicial Council of California  
FL-115 (Rev. January 1, 2005)

**PROOF OF SERVICE OF SUMMONS**  
(Family Law—Uniform Parentage—Custody and Support)

Page 1 of 2  
Code of Civil Procedure, § 417.10  
www.courtinfo.ca.gov

- 1** Write your name and address. You may write your phone, e-mail address and fax number.
- 2** Write “Fresno” after COUNTY OF. The address is 1130 "O" Street, Fresno, CA 93724-2201. The Branch Name is: B.F. Sisk Courthouse.
- 3** Write the full names (first, middle, last) of the parties. You are the “Petitioner” if you have started the case. You are the “Respondent” if another person started the case against you.
- 4** Check the box that applies to you. Check “Family Law” if you are married, “Uniform Parentage” if you are unmarried, and “Custody and Support” if you are married or unmarried and only requesting custody/visitation/support orders.
- 5** Check the boxes of the forms that you are serving on the other party. If there are additional forms, write the form names under “Other”.

The rest of this form is filled out by the person who serves the party for you. You can’t serve the other party yourself. Someone who is over the age of 18 must PERSONALLY serve the other party. That person will complete the rest of this PROOF OF SERVICE.

- 6** Write the address where the Respondent was served.
- 7** If you were able to have the Respondent personally served, check the box for “Personal Service”. The person that served your papers for you will write in the date and time they served the papers. If they were unable to serve the papers personally, but tried on at least 3 different dates and times, and were able to give them to another adult at that address, check “Substitute Service” and check boxes (1) or (2).

*How to fill out*  
**PROOF OF SERVICE  
OF SUMMONS  
(FL-115)**

**Page 2**

**DIRECTIONS**

**(Continued from page 1)**

PETITIONER: RESPONDENT:	8	CASE NUMBER:
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3. b. (cont.) on (date): \_\_\_\_\_ at (time): \_\_\_\_\_

9 I thereafter mailed additional copies (by first class, postage prepaid) to the respondent at the place where the copies were left (Code Civ. Proc., § 415.20b) on (date): \_\_\_\_\_

A declaration of diligence is attached, stating the actions taken to first attempt personal service.

c. ☐ Mail and acknowledgment service. I mailed the copies to the respondent, addressed as shown in item 2, by first-class mail, postage prepaid, on (date): \_\_\_\_\_ from (city): \_\_\_\_\_

10 (1) ☐ with two copies of the *Notice and Acknowledgment of Receipt (Family Law)* (form FL-117) and a postage-paid return envelope addressed to me. (Attach completed *Notice and Acknowledgment of Receipt (Family Law)* (form FL-117).) (Code Civ. Proc., § 415.30.)

(2) ☐ to an address outside California (by registered or certified mail with return receipt requested). (Attach signed return receipt or other evidence of actual delivery to the respondent.) (Code Civ. Proc., § 415.40.)

d. ☐ Other (specify code section): \_\_\_\_\_  
☐ Continued on Attachment 3d.

4. The "NOTICE TO THE PERSON SERVED" on the *Summons* was completed as follows (Code Civ. Proc., §§ 412.30, 415.10, 474):

11 a. ☐ As an individual or  
 b. ☐ On behalf of respondent who is a

(1) ☐ minor. (Code Civ. Proc., § 416.60.)  
 (2) ☐ ward or conservatee. (Code Civ. Proc., § 416.70.)  
 (3) ☐ other (specify): \_\_\_\_\_

5. Person who served papers

Name: 12 \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_

This person is

13 a. ☐ exempt from registration under Business and Professions Code section 22350(b).  
 b. ☐ not a registered California process server.  
 c. ☐ a registered California process server: ☐ an employee or ☐ an independent contractor

(1) Registration no.: \_\_\_\_\_  
 (2) County: \_\_\_\_\_

d. The fee for service was (specify): \$ \_\_\_\_\_

6. ☐ I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.  
 —or—

7. ☐ I am a California sheriff, marshal, or constable, and I certify that the foregoing is true and correct.

14

Date: \_\_\_\_\_

\_\_\_\_\_  
(NAME OF PERSON WHO SERVED PAPERS)

\_\_\_\_\_  
(SIGNATURE OF PERSON WHO SERVED PAPERS)

FL-115 (Rev. January 1, 2005)

**PROOF OF SERVICE OF SUMMONS**  
 (Family Law—Uniform Parentage—Custody and Support)

Page 2 of 2

- 8 Write the name of the Petitioner and the Respondent.
  - 9 If the Respondent was served by “Substitute Service”, write in the date and time the papers were left with a responsible adult at the Respondent’s home or business. (You must then mail a copy of the same papers addressed to the Respondent at the home or business described).
  - 10 If the Respondent agrees to accept the papers, they may be mailed to the respondent with a “Notice and Acknowledgment of Receipt” form FL-117, which must be signed and returned to the court for filing. Check box 3(c), fill in the date and place, *example: Fresno*, and then check (1).
- If the respondent lives out of State the forms may be mailed registered or certified mail, with return receipt.
- 11 Check box 4(a). *Unless the respondent is:* a Minor, Ward of the Court, Conservator or other. If so check the appropriate box.
  - 12 Write in the name, address and phone number of the person who gave the papers to the Respondent.
  - 13 If the person who delivered the papers is not a sheriff or registered process server, check box 5b and 6.
  - 14 The person who served the papers will date, print and sign his name.

# **BLANK FORMS**

# SUMMONS (Family Law)

FL-110  
CITACION (Derecho familiar)

NOTICE TO RESPONDENT (Name):

AVISO AL DEMANDADO (Nombre):

FOR COURT USE ONLY  
(SOLO PARA USO DE LA CORTE)

You are being sued. Lo están demandando.

Petitioner's name is:

Nombre del demandante:

CASE NUMBER (NUMERO DE CASO):

You have **30 calendar days** after this *Summons* and *Petition* are served on you to file a *Response* (form FL-120 or FL-123) at the court and have a copy served on the petitioner. A letter or phone call will not protect you.

If you do not file your *Response* on time, the court may make orders affecting your marriage or domestic partnership, your property, and custody of your children. You may be ordered to pay support and attorney fees and costs. If you cannot pay the filing fee, ask the clerk for a fee waiver form.

If you want legal advice, contact a lawyer immediately. You can get information about finding lawyers at the California Courts Online Self-Help Center ([www.courtinfo.ca.gov/selfhelp](http://www.courtinfo.ca.gov/selfhelp)), at the California Legal Services Web site ([www.lawhelpcalifornia.org](http://www.lawhelpcalifornia.org)), or by contacting your local county bar association.

Tiene **30 días corridos** después de haber recibido la entrega legal de esta Citación y Petición para presentar una Respuesta (formulario FL-120 o FL-123) ante la corte y efectuar la entrega legal de una copia al demandante. Una carta o llamada telefónica no basta para protegerlo.

Si no presenta su Respuesta a tiempo, la corte puede dar órdenes que afecten su matrimonio o pareja de hecho, sus bienes y la custodia de sus hijos. La corte también le puede ordenar que pague manutención, y honorarios y costos legales. Si no puede pagar la cuota de presentación, pida al secretario un formulario de exención de cuotas.

Si desea obtener asesoramiento legal, póngase en contacto de inmediato con un abogado. Puede obtener información para encontrar a un abogado en el Centro de Ayuda de las Cortes de California ([www.sucorte.ca.gov](http://www.sucorte.ca.gov)), en el sitio Web de los Servicios Legales de California ([www.lawhelpcalifornia.org](http://www.lawhelpcalifornia.org)) o poniéndose en contacto con el colegio de abogados de su condado.

**NOTICE:** The restraining orders on page 2 are effective against both spouses or domestic partners until the petition is dismissed, a judgment is entered, or the court makes further orders. These orders are enforceable anywhere in California by any law enforcement officer who has received or seen a copy of them.

**AVISO:** Las órdenes de restricción que figuran en la página 2 valen para ambos cónyuges o pareja de hecho hasta que se despidan la petición, se emita un fallo o la corte dé otras órdenes. Cualquier autoridad de la ley que haya recibido o visto una copia de estas órdenes puede hacerlas acatar en cualquier lugar de California.

**NOTE:** If a judgment or support order is entered, the court may order you to pay all or part of the fees and costs that the court waived for yourself or for the other party. If this happens, the party ordered to pay fees shall be given notice and an opportunity to request a hearing to set aside the order to pay waived court fees.

**AVISO:** Si se emite un fallo u orden de manutención, la corte puede ordenar que usted pague parte de, o todos las cuotas y costos de la corte previamente exentas a petición de usted o de la otra parte. Si esto ocurre, la parte ordenada a pagar estas cuotas debe recibir aviso y la oportunidad de solicitar una audiencia para anular la orden de pagar las cuotas exentas.

1. The name and address of the court are (El nombre y dirección de la corte son):

2. The name, address, and telephone number of the petitioner's attorney, or the petitioner without an attorney, are:  
(El nombre, dirección y número de teléfono del abogado del demandante, o del demandante si no tiene abogado, son):

Date (Fecha): Clerk, by (Secretario, por) \_\_\_\_\_, Deputy (Asistente)

[SEAL]

**NOTICE TO THE PERSON SERVED:** You are served

**AVISO A LA PERSONA QUE RECIBIO LA ENTREGA:** Esta entrega se realiza

- a. ☐ as an individual. (a usted como individuo.)
- b. ☐ on behalf of respondent who is a (en nombre de un demandado que es):
- (1) ☐ minor (menor de edad)
- (2) ☐ ward or conservatee (dependiente de la corte o pupilo)
- (3) ☐ other (specify) (otro - especifique):

(Read the reverse for important information.) (Lea importante información al dorso.)

Page 1 of 2

### WARNING-IMPORTANT INFORMATION

**WARNING:** California law provides that, for purposes of division of property upon dissolution of a marriage or domestic partnership or upon legal separation, property acquired by the parties during marriage or domestic partnership in joint form is presumed to be community property. If either party to this action should die before the jointly held community property is divided, the language in the deed that characterizes how title is held (i.e., joint tenancy, tenants in common, or community property) will be controlling, and not the community property presumption. You should consult your attorney if you want the community property presumption to be written into the recorded title to the property.

### STANDARD FAMILY LAW RESTRAINING ORDERS

**Starting immediately, you and your spouse or domestic partner are restrained from**

1. Removing the minor child or children of the parties, if any, from the state without the prior written consent of the other party or an order of the court;
2. Cashing, borrowing against, canceling, transferring, disposing of, or changing the beneficiaries of any insurance or other coverage, including life, health, automobile, and disability, held for the benefit of the parties and their minor child or children;
3. Transferring, encumbering, hypothecating, concealing, or in any way disposing of any property, real or personal, whether community, quasi-community, or separate, without the written consent of the other party or an order of the court, except in the usual course of business or for the necessities of life; and
4. Creating a nonprobate transfer or modifying a nonprobate transfer in a manner that affects the disposition of property subject to the transfer, without the written consent of the other party or an order of the court. Before revocation of a nonprobate transfer can take effect or a right of survivorship to property can be eliminated, notice of the change must be filed and served on the other party.

You must notify each other of any proposed extraordinary expenditures at least five business days prior to incurring these extraordinary expenditures and account to the court for all extraordinary expenditures made after these restraining orders are effective. However, you may use community property, quasi-community property, or your own separate property to pay an attorney to help you or to pay court costs.

### ADVERTENCIA - INFORMACION IMPORTANTE

**ADVERTENCIA:** De acuerdo a la ley de California, las propiedades adquiridas por las partes durante su matrimonio o pareja de hecho en forma conjunta se consideran propiedad comunitaria para los fines de la división de bienes que ocurre cuando se produce una disolución o separación legal del matrimonio o pareja de hecho. Si cualquiera de las partes de este caso llega a fallecer antes de que se divida la propiedad comunitaria de tenencia conjunta, el destino de la misma quedará determinado por las cláusulas de la escritura correspondiente que describen su tenencia (por ej., tenencia conjunta, tenencia en común o propiedad comunitaria) y no por la presunción de propiedad comunitaria. Si quiere que la presunción comunitaria quede registrada en la escritura de la propiedad, debería consultar con un abogado.

### ORDENES DE RESTRICCION NORMALES DE DERECHO FAMILIAR

**En forma inmediata, usted y su cónyuge o pareja de hecho tienen prohibido:**

1. Llevarse del estado de California a los hijos menores de las partes, si los hubiera, sin el consentimiento previo por escrito de la otra parte o una orden de la corte;
2. Cobrar, pedir prestado, cancelar, transferir, deshacerse o cambiar el nombre de los beneficiarios de cualquier seguro u otro tipo de cobertura, tal como de vida, salud, vehículo y discapacidad, que tenga como beneficiario(s) a las partes y su(s) hijo(s) menor(es);
3. Transferir, gravar, hipotecar, ocultar o deshacerse de cualquier manera de cualquier propiedad, inmueble o personal, ya sea comunitaria, cuasicomunitaria o separada, sin el consentimiento escrito de la otra parte o una orden de la corte, con excepción las operaciones realizadas en el curso normal de actividades o para satisfacer las necesidades de la vida; y
4. Crear o modificar una transferencia no testamentaria de manera que afecte el destino de una propiedad sujeta a transferencia, sin el consentimiento por escrito de la otra parte o una orden de la corte. Antes de que se pueda eliminar la revocación de una transferencia no testamentaria, se debe presentar ante la corte un aviso del cambio y hacer una entrega legal de dicho aviso a la otra parte.

Cada parte tiene que notificar a la otra sobre cualquier gasto extraordinario propuesto, por lo menos cinco días laborales antes de realizarlo, y rendir cuenta a la corte de todos los gastos extraordinarios realizados después de que estas órdenes de restricción hayan entrado en vigencia. No obstante, puede usar propiedad comunitaria, cuasicomunitaria o suya separada para pagar a un abogado o para ayudarle a pagar los costos de la corte.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):      TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA • COUNTY OF FRESNO</b> 1130 "O" Street Fresno, California 93724-2201	
<b>MARRIAGE OF</b> PETITIONER:  RESPONDENT:	CASE NUMBER:
<b>PETITION FOR</b> <input type="checkbox"/> <b>Dissolution of Marriage</b> <input type="checkbox"/> <b>Legal Separation</b> <input type="checkbox"/> <b>Nullity of Marriage</b> <div style="float: right; margin-top: 10px;"> <input type="checkbox"/> <b>AMENDED</b> </div>	

1. RESIDENCE (Dissolution only) ☐ Petitioner ☐ Respondent has been a resident of this state for at least six months and of this county for at least three months immediately preceding the filing of this *Petition for Dissolution of Marriage*.

2. STATISTICAL FACTS

- a. Date of marriage: \_\_\_\_\_ c. Time from date of marriage to date of separation (specify):  
 b. Date of separation: \_\_\_\_\_ Years: \_\_\_\_\_ Months: \_\_\_\_\_

3. DECLARATION REGARDING MINOR CHILDREN (include children of this relationship born prior to or during the marriage or adopted during the marriage):

- a. ☐ There are no minor children.  
 b. ☐ The minor children are:

<u>Child's name</u>	<u>Birthdate</u>	<u>Age</u>	<u>Sex</u>
---------------------	------------------	------------	------------

☐ Continued on Attachment 3b.

- c. If there are minor children of the Petitioner and Respondent, a completed *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)* (form FL-105) must be attached.  
 d. ☐ A completed voluntary declaration of paternity regarding minor children born to the Petitioner and Respondent prior to the marriage is attached.

4. SEPARATE PROPERTY

Petitioner requests that the assets and debts listed ☐ in *Property Declaration* (form FL-160) ☐ in Attachment 4  
☐ below be confirmed as separate property.  
Item Confirm to

**NOTICE: You may redact (black out) social security numbers from any written material filed with the court in this case other than a form used to collect child or spousal support.**

MARRIAGE OF (last name, first name of parties):  _____	CASE NUMBER:  _____
--	---------------------------

5. DECLARATION REGARDING COMMUNITY AND QUASI-COMMUNITY ASSETS AND DEBTS AS CURRENTLY KNOWN

- a. ☐ There are no such assets or debts subject to disposition by the court in this proceeding.
- b. ☐ All such assets and debts are listed ☐ in *Property Declaration* (form FL-160) ☐ in Attachment 5b.  
☐ below (specify): \_\_\_\_\_

6. **Petitioner requests**

- |  |  |
|--|--|
| <p>a. <input type="checkbox"/> dissolution of the marriage based on</p> <p style="margin-left: 20px;">(1) <input type="checkbox"/> irreconcilable differences. (Fam. Code, § 2310(a).)</p> <p style="margin-left: 20px;">(2) <input type="checkbox"/> incurable insanity. (Fam. Code, § 2310(b).)</p> <p>b. <input type="checkbox"/> legal separation of the parties based on</p> <p style="margin-left: 20px;">(1) <input type="checkbox"/> irreconcilable differences. (Fam. Code, § 2310(a).)</p> <p style="margin-left: 20px;">(2) <input type="checkbox"/> incurable insanity. (Fam. Code, § 2310(b).)</p> <p>c. <input type="checkbox"/> nullity of void marriage based on</p> <p style="margin-left: 20px;">(1) <input type="checkbox"/> incestuous marriage. (Fam. Code, § 2200.)</p> <p style="margin-left: 20px;">(2) <input type="checkbox"/> bigamous marriage. (Fam. Code, § 2201.)</p> | <p>d. <input type="checkbox"/> nullity of voidable marriage based on</p> <p style="margin-left: 20px;">(1) <input type="checkbox"/> petitioner's age at time of marriage. (Fam. Code, § 2210(a).)</p> <p style="margin-left: 20px;">(2) <input type="checkbox"/> prior existing marriage. (Fam. Code, § 2210(b).)</p> <p style="margin-left: 20px;">(3) <input type="checkbox"/> unsound mind. (Fam. Code, § 2210(c).)</p> <p style="margin-left: 20px;">(4) <input type="checkbox"/> fraud. (Fam. Code, § 2210(d).)</p> <p style="margin-left: 20px;">(5) <input type="checkbox"/> force. (Fam. Code, § 2210(e).)</p> <p style="margin-left: 20px;">(6) <input type="checkbox"/> physical incapacity. (Fam. Code, § 2210(f).)</p> |
|--|--|

7. **Petitioner requests** that the court grant the above relief and make injunctive (including restraining) and other orders as follows:

- |  | Petitioner               | Respondent               | Joint                    | Other                    |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Legal custody of children to .....  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Physical custody of children to .....   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Child visitation be granted to .....  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| As requested in form: <input type="checkbox"/> FL-311 <input type="checkbox"/> FL-312 <input type="checkbox"/> FL-341(C) <input type="checkbox"/> FL-341(D) <input type="checkbox"/> FL-341(E) <input type="checkbox"/> Attachment 7c. |                          |                          |                          |                          |
| d. <input type="checkbox"/> Determination of parentage of any children born to the Petitioner and Respondent prior to the marriage.  | <input type="checkbox"/> | <input type="checkbox"/> |                          |                          |
| e. Attorney fees and costs payable by .....  | <input type="checkbox"/> | <input type="checkbox"/> |                          |                          |
| f. Spousal support payable to (earnings assignment will be issued) .....   | <input type="checkbox"/> | <input type="checkbox"/> |                          |                          |
| g. <input type="checkbox"/> Terminate the court's jurisdiction (ability) to award spousal support to Respondent.   |                          |                          |                          |                          |
| h. <input type="checkbox"/> Property rights be determined.   |                          |                          |                          |                          |
| i. <input type="checkbox"/> Petitioner's former name be restored to (specify): _____   |                          |                          |                          |                          |
| j. <input type="checkbox"/> Other (specify): _____   |                          |                          |                          |                          |

☐ Continued on Attachment 7j.

8. **Child support**—If there are minor children born to or adopted by the Petitioner and Respondent before or during this marriage, the court will make orders for the support of the children upon request and submission of financial forms by the requesting party. An earnings assignment may be issued without further notice. Any party required to pay support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent.

9. **I HAVE READ THE RESTRAINING ORDERS ON THE BACK OF THE SUMMONS, AND I UNDERSTAND THAT THEY APPLY TO ME WHEN THIS PETITION IS FILED.**

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

<p>Date: _____</p> <p style="text-align: center;">(TYPE OR PRINT NAME)</p>	<p style="text-align: center;">▶</p> <p>_____</p> <p style="text-align: center;">(SIGNATURE OF PETITIONER)</p>
<p>Date: _____</p> <p style="text-align: center;">(TYPE OR PRINT NAME)</p>	<p style="text-align: center;">▶</p> <p>_____</p> <p style="text-align: center;">(SIGNATURE OF ATTORNEY FOR PETITIONER)</p>

**NOTICE:** Dissolution or legal separation may automatically cancel the rights of a spouse under the other spouse's will, trust, retirement plan, power of attorney, pay on death bank account, survivorship rights to any property owned in joint tenancy, and any other similar thing. It does not automatically cancel the right of a spouse as beneficiary of the other spouse's life insurance policy. You should review these matters, as well as any credit cards, other credit accounts, insurance policies, retirement plans, and credit reports to determine whether they should be changed or whether you should take any other actions. However, some changes may require the agreement of your spouse or a court order (see Family Code sections 231–235).

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):  <hr/> TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b>  STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: _____ (This section applies only to family law cases ) RESPONDENT: _____ OTHER PARTY: _____	
GUARDIANSHIP OF (Name): _____ (This section applies only to guardianship cases ) <div style="text-align: right;">Minor</div>	CASE NUMBER:
<b>DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)</b>	

1. I am a party to this proceeding to determine custody of a child.
2. ☐ My present address and the present address of each child residing with me is confidential under Family Code section 3429 as I have indicated in item 3.
3. There are (specify number): \_\_\_\_\_ minor children who are subject to this proceeding, as follows:  
*(Insert the information requested below. The residence information must be given for the last FIVE years.)*

a. Child's name	Place of birth	Date of birth	Sex
Period of residence <div style="text-align: right;">to present</div>	Address <input type="checkbox"/> Confidential	Person child lived with (name and complete current address) <input type="checkbox"/> Confidential	Relationship
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
to	Child's residence (City, State)	Person child lived with (name and complete current address)	

  

b. Child's name	Place of birth	Date of birth	Sex
<input type="checkbox"/> Residence information is the same as given above for child a. (If NOT the same, provide the information below )			
Period of residence <div style="text-align: right;">to present</div>	Address <input type="checkbox"/> Confidential	Person child lived with (name and complete current address) <input type="checkbox"/> Confidential	Relationship
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
to	Child's residence (City, State)	Person child lived with (name and complete current address)	

- c. ☐ Additional residence information for a child listed in item a or b is continued on attachment 3c.
- d. ☐ Additional children are listed on form FL-105(A)/GC-120(A). (Provide all requested information for additional children.)

SHORT TITLE: _____	CASE NUMBER: _____
-----------------------	-----------------------

4. Do you have information about, or have you participated as a party or as a witness or in some other capacity in, another court case or custody or visitation proceeding, in California or elsewhere, concerning a child subject to this proceeding?

☐ Yes ☐ No (If yes, attach a copy of the orders (if you have one) and provide the following information):

Proceeding	Case number	Court (name, state, location)	Court order or judgment (date)	Name of each child	Your connection to the case	Case status
a. <input type="checkbox"/> Family						
b. <input type="checkbox"/> Guardianship						
c. <input type="checkbox"/> Other						

Proceeding	Case Number	Court (name, state, location)
d. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency		
e. <input type="checkbox"/> Adoption		

5. ☐ One or more domestic violence restraining/protective orders are now in effect. (Attach a copy of the orders if you have one and provide the following information):

Court	County	State	Case number (if known)	Orders expire (date)
a. <input type="checkbox"/> Criminal				
b. <input type="checkbox"/> Family				
c. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency				
d. <input type="checkbox"/> Other				

6. Do you know of any person who is not a party to this proceeding who has physical custody or claims to have custody of or visitation rights with any child in this case? ☐ Yes ☐ No (If yes, provide the following information):

<p>a. Name and address of person</p>   <p><input type="checkbox"/> Has physical custody  <input type="checkbox"/> Claims custody rights  <input type="checkbox"/> Claims visitation rights</p>	<p>b. Name and address of person</p>   <p><input type="checkbox"/> Has physical custody  <input type="checkbox"/> Claims custody rights  <input type="checkbox"/> Claims visitation rights</p>	<p>c. Name and address of person</p>   <p><input type="checkbox"/> Has physical custody  <input type="checkbox"/> Claims custody rights  <input type="checkbox"/> Claims visitation rights</p>
Name of each child	Name of each child	Name of each child

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

\_\_\_\_\_  
(TYPE OR PRINT NAME)



\_\_\_\_\_  
(SIGNATURE OF DECLARANT)

7. ☐ Number of pages attached: \_\_\_\_\_

**NOTICE TO DECLARANT: You have a continuing duty to inform this court if you obtain any information about a custody proceeding in a California court or any other court concerning a child subject to this proceeding.**

CASE NAME:  	CASE NUMBER:  
--------------------	----------------------

**ATTACHMENT TO  
DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)**

<input type="text"/> Child's name <input type="checkbox"/> Residence information is the same as given on form FL-105/GC-120 for child a. (If NOT the same, provide the information below )		Place of birth	Date of birth	Sex
Period of residence  to present	Present address  <input type="checkbox"/> Confidential	Person child lived with (name and complete current address)  <input type="checkbox"/> Confidential	Relationship	
to	Child's residence (City, State)	Person child lived with (name and complete current address)		
to	Child's residence (City, State)	Person child lived with (name and complete current address)		
to	Child's residence (City, State)	Person child lived with (name and complete current address)		

  

<input type="text"/> Child's name <input type="checkbox"/> Residence information is the same as given on form FL-105/GC-120 for child a. (If NOT the same, provide the information below )		Place of birth	Date of birth	Sex
Period of residence  to present	Address  <input type="checkbox"/> Confidential	Person child lived with (name and complete current address)  <input type="checkbox"/> Confidential	Relationship	
to	Child's residence (City, State)	Person child lived with (name and complete current address)		
to	Child's residence (City, State)	Person child lived with (name and complete current address)		
to	Child's residence (City, State)	Person child lived with (name and complete current address)		

  

<input type="text"/> Child's name <input type="checkbox"/> Residence information is the same as given on form FL-105/GC-120 for child a. (If NOT the same, provide the information below )		Place of birth	Date of birth	Sex
Period of residence  to present	Address  <input type="checkbox"/> Confidential	Person child lived with (name and complete current address)  <input type="checkbox"/> Confidential	Relationship	
to	Child's residence (City, State)	Person child lived with (name and complete current address)		
to	Child's residence (City, State)	Person child lived with (name and complete current address)		
to	Child's residence (City, State)	Person child lived with (name and complete current address)		

CASE NAME: _____	CASE NUMBER: _____
---------------------	-----------------------

**ATTACHMENT TO  
DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)**

_____ Child's name <input type="checkbox"/> Residence information is the same as given on form FL-105/GC-120 for child a. (If NOT the same, provide the information below )		Place of birth	Date of birth	Sex
Period of residence	Present address	Person child lived with (name and complete current address)	Relationship	
to present	<input type="checkbox"/> Confidential	<input type="checkbox"/> Confidential		
to	Child's residence (City, State)	Person child lived with (name and complete current address)		
to	Child's residence (City, State)	Person child lived with (name and complete current address)		
to	Child's residence (City, State)	Person child lived with (name and complete current address)		

  

_____ Child's name <input type="checkbox"/> Residence information is the same as given on form FL-105/GC-120 for child a. (If NOT the same, provide the information below )		Place of birth	Date of birth	Sex
Period of residence	Address	Person child lived with (name and complete current address)	Relationship	
to present	<input type="checkbox"/> Confidential	<input type="checkbox"/> Confidential		
to	Child's residence (City, State)	Person child lived with (name and complete current address)		
to	Child's residence (City, State)	Person child lived with (name and complete current address)		
to	Child's residence (City, State)	Person child lived with (name and complete current address)		

  

_____ Child's name <input type="checkbox"/> Residence information is the same as given on form FL-105/GC-120 for child a. (If NOT the same, provide the information below )		Place of birth	Date of birth	Sex
Period of residence	Address	Person child lived with (name and complete current address)	Relationship	
to present	<input type="checkbox"/> Confidential	<input type="checkbox"/> Confidential		
to	Child's residence (City, State)	Person child lived with (name and complete current address)		
to	Child's residence (City, State)	Person child lived with (name and complete current address)		
to	Child's residence (City, State)	Person child lived with (name and complete current address)		

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address):

TELEPHONE NO.:

ATTORNEY FOR (Name):

**SUPERIOR COURT OF CALIFORNIA • COUNTY OF FRESNO**1130 "O" Street  
Fresno, California 93724-2201

PETITIONER:

RESPONDENT:

**DECLARATION OF DISCLOSURE**☐  
☐

Petitioner's

Respondent's

☐  
☐

Preliminary

Final

CASE NUMBER:

**DO NOT FILE WITH THE COURT**

*Both the preliminary and the final declaration of disclosure must be served on the other party with certain exceptions. Neither disclosure is filed with the court. A declaration stating service was made of the final declaration of disclosure must be filed with the court (see form FL-141).*

*A preliminary declaration of disclosure but not a final declaration of disclosure is required in the case of a summary dissolution (see Family Code section 2109) or in a default judgment (see Family Code section 2110) provided the default is not a stipulated judgment or a judgment based upon a marriage settlement agreement.*

*A declaration of disclosure is required in a nullity or legal separation action as well as in a dissolution action.*

**Attached are the following:**

1. ☐ A completed *Schedule of Assets and Debts* (form FL-142).
2. ☐ A completed *Income and Expense Declaration* (form FL-150 (as applicable)).
3. ☐ A statement of all material facts and information regarding valuation of all assets that are community property or in which the community has an interest (*not a form*).
4. ☐ A statement of all material facts and information regarding obligations for which the community is liable (*not a form*).
5. ☐ An accurate and complete written disclosure of any investment opportunity, business opportunity, or other income-producing opportunity presented since the date of separation that results from any investment, significant business, or other income-producing opportunity from the date of marriage to the date of separation (*not a form*).

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(TYPE OR PRINT NAME)

(SIGNATURE)

**THIS FORM SHOULD NOT BE FILED WITH THE COURT****FL-142**

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name and Address):</i>		TELEPHONE NO.:
ATTORNEY FOR <i>(Name):</i>		
<b>SUPERIOR COURT OF CALIFORNIA • COUNTY OF FRESNO</b> 1130 "O" Street Fresno, California 93724-2201		
PETITIONER:		
RESPONDENT:		
<b>SCHEDULE OF ASSETS AND DEBTS</b> <input type="checkbox"/> <b>Petitioner's</b> <input type="checkbox"/> <b>Respondent's</b>		CASE NUMBER:

— INSTRUCTIONS —

List all your known community and separate assets or debts. Include assets even if they are in the possession of another person, including your spouse. If you contend an asset or debt is separate, put P (for Petitioner) or R (for Respondent) in the first column (separate property) to indicate to whom you contend it belongs.

All values should be as of the date of signing the declaration unless you specify a different valuation date with the description. For additional space, use a continuation sheet numbered to show which item is being continued.

ITEM NO.	ASSETS DESCRIPTION	SEP. PROP	DATE ACQUIRED	CURRENT GROSS FAIR MARKET VALUE	AMOUNT OF MONEY OWED OR ENCUMBRANCE
1.	REAL ESTATE <i>(Give street addresses and attach copies of deeds with legal descriptions and latest lender's statement.)</i>			\$	\$
2.	HOUSEHOLD FURNITURE, FURNISHINGS, APPLIANCES <i>(Identify.)</i>				
3.	JEWELRY, ANTIQUES, ART, COIN COLLECTIONS, etc. <i>(Identify.)</i>				

ITEM NO.	ASSETS DESCRIPTION	SEP. PROP	DATE ACQUIRED	CURRENT GROSS FAIR MARKET VALUE	AMOUNT OF MONEY OWED OR ENCUMBRANCE
4.	VEHICLES, BOATS, TRAILERS <i>(Describe and attach copy of title document.)</i>			\$	\$
5.	SAVINGS ACCOUNTS <i>(Account name, account number, bank, and branch. Attach copy of latest statement.)</i>				
6.	CHECKING ACCOUNTS <i>(Account name and number, bank, and branch. Attach copy of latest statement.)</i>				
7.	CREDIT UNION, OTHER DEPOSIT ACCOUNTS <i>(Account name and number, bank, and branch. Attach copy of latest statement.)</i>				
8.	CASH <i>(Give location.)</i>				
9.	TAX REFUND				
10.	LIFE INSURANCE WITH CASH SURRENDER OR LOAN VALUE <i>(Attach copy of declaration page for each policy.)</i>				

ITEM NO.	ASSETS DESCRIPTION	SEP. PROP	DATE ACQUIRED	CURRENT GROSS FAIR MARKET VALUE	AMOUNT OF MONEY OWED OR ENCUMBRANCE
11.	STOCKS, BONDS, SECURED NOTES, MUTUAL FUNDS <i>(Give certificate number and attach copy of the certificate or copy of latest statement.)</i>			\$	\$
12.	RETIREMENT AND PENSIONS <i>(Attach copy of latest summary plan documents and latest benefit statement.)</i>				
13.	PROFIT - SHARING, ANNUITIES, IRAS, DEFERRED COMPENSATION <i>(Attach copy of latest statement.)</i>				
14.	ACCOUNTS RECEIVABLE AND UNSECURED NOTES <i>(Attach copy of each.)</i>				
15.	PARTNERSHIPS AND OTHER BUSINESS INTERESTS <i>(Attach copy of most current K-1 form and Schedule C.)</i>				
16.	OTHER ASSETS				
17.	TOTAL ASSETS FROM CONTINUATION SHEET				
18.	TOTAL ASSETS			\$	\$

ITEM NO.	DEBTS—SHOW TO WHOM OWED	SEP. PROP.	TOTAL OWING	DATE INCURRED
19.	STUDENT LOANS <i>(Give details.)</i>		\$	
20.	TAXES <i>(Give details.)</i>			
21.	SUPPORT ARREARAGES <i>(Attach copies of orders and statements.)</i>			
22.	LOANS—UNSECURED <i>(Give bank name and loan number and attach copy of latest statement.)</i>			
23.	CREDIT CARDS <i>(Give creditor's name and address and the account number. Attach copy of latest statement.)</i>			
24.	OTHER DEBTS <i>(Specify):</i>			
25.	TOTAL DEBTS FROM CONTINUATION SHEET			
26.	TOTAL DEBTS		\$	

27. ☐ *(Specify number):* \_\_\_\_\_ pages are attached as continuation sheets.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

<hr style="border: none; border-top: 1px solid black;"/> (TYPE OR PRINT NAME)		<hr style="border: none; border-top: 1px solid black;"/> (SIGNATURE OF DECLARANT)
---	--	---

Attach copies of your pay stubs for last two months (black out social security numbers).

- American LegalNet, Inc.  
www.FormsWorkflow.com

PETITIONER/PLAINTIFF: _____ RESPONDENT/DEFENDANT: _____ OTHER PARENT/CLAIMANT: _____	CASE NUMBER: _____
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**Attach copies of your pay stubs for the last two months and proof of any other income. Take a copy of your latest federal tax return to the court hearing. (Black out your social security number on the pay stub and tax return.)**

5. **Income** (For average monthly, add up all the income you received in each category in the last 12 months and divide the total by 12.)

	Last month	Average monthly
a. Salary or wages (gross, before taxes) . . . . .	\$ _____	_____
b. Overtime (gross, before taxes) . . . . .	\$ _____	_____
c. Commissions or bonuses . . . . .	\$ _____	_____
d. Public assistance (for example: TANF, SSI, GA/GR) <input type="checkbox"/> currently receiving . . . . .	\$ _____	_____
e. Spousal support <input type="checkbox"/> from this marriage <input type="checkbox"/> from a different marriage . . . . .	\$ _____	_____
f. Partner support <input type="checkbox"/> from this domestic partnership <input type="checkbox"/> from a different domestic partnership . . . . .	\$ _____	_____
g. Pension/retirement fund payments . . . . .	\$ _____	_____
h. Social security retirement (not SSI) . . . . .	\$ _____	_____
i. Disability: <input type="checkbox"/> Social security (not SSI) <input type="checkbox"/> State disability (SDI) <input type="checkbox"/> Private insurance . . . . .	\$ _____	_____
j. Unemployment compensation . . . . .	\$ _____	_____
k. Workers' compensation . . . . .	\$ _____	_____
l. Other (military BAQ, royalty payments, etc.) (specify): . . . . .	\$ _____	_____

6. **Investment income** (Attach a schedule showing gross receipts less cash expenses for each piece of property.)

a. Dividends/interest . . . . .	\$ _____	_____
b. Rental property income . . . . .	\$ _____	_____
c. Trust income . . . . .	\$ _____	_____
d. Other (specify): . . . . .	\$ _____	_____

7. **Income from self-employment, after business expenses for all businesses.** . . . . . \$ \_\_\_\_\_

I am the ☐ owner/sole proprietor ☐ business partner ☐ other (specify): \_\_\_\_\_

Number of years in this business (specify): \_\_\_\_\_

Name of business (specify): \_\_\_\_\_

Type of business (specify): \_\_\_\_\_

**Attach a profit and loss statement for the last two years or a Schedule C from your last federal tax return. Black out your social security number. If you have more than one business, provide the information above for each of your businesses.**

8. ☐ **Additional income.** I received one-time money (lottery winnings, inheritance, etc.) in the last 12 months (specify source and amount): \_\_\_\_\_

9. ☐ **Change in income.** My financial situation has changed significantly over the last 12 months because (specify): \_\_\_\_\_

10. **Deductions**

	Last month
a. Required union dues . . . . .	\$ _____
b. Required retirement payments (not social security, FICA, 401(k), or IRA) . . . . .	\$ _____
c. Medical, hospital, dental, and other health insurance premiums (total monthly amount) . . . . .	\$ _____
d. Child support that I pay for children from other relationships . . . . .	\$ _____
e. Spousal support that I pay by court order from a different marriage . . . . .	\$ _____
f. Partner support that I pay by court order from a different domestic partnership . . . . .	\$ _____
g. Necessary job-related expenses not reimbursed by my employer (attach explanation labeled "Question 10g") . . . . .	\$ _____

11. **Assets**

	Total
a. Cash and checking accounts, savings, credit union, money market, and other deposit accounts . . . . .	\$ _____
b. Stocks, bonds, and other assets I could easily sell . . . . .	\$ _____
c. All other property, <input type="checkbox"/> real and <input type="checkbox"/> personal (estimate fair market value minus the debts you owe) . . . . .	\$ _____

PETITIONER/PLAINTIFF: _____ RESPONDENT/DEFENDANT: _____ OTHER PARENT/CLAIMANT: _____	CASE NUMBER: _____
---	-----------------------

**12. The following people live with me:**

Name	Age	How the person is related to me? (ex: son)	That person's gross monthly income	Pays some of the household expenses?
a.				<input type="checkbox"/> Yes <input type="checkbox"/> No
b.				<input type="checkbox"/> Yes <input type="checkbox"/> No
c.				<input type="checkbox"/> Yes <input type="checkbox"/> No
d.				<input type="checkbox"/> Yes <input type="checkbox"/> No
e.				<input type="checkbox"/> Yes <input type="checkbox"/> No

**13. Average monthly expenses**      ☐ Estimated expenses      ☐ Actual expenses      ☐ Proposed needs

- |   |   |
|---|---|
| <p>a. Home:</p> <p>(1) <input type="checkbox"/> Rent or <input type="checkbox"/> mortgage... \$ _____</p> <p style="padding-left: 20px;">If mortgage:</p> <p style="padding-left: 40px;">(a) average principal: \$ _____</p> <p style="padding-left: 40px;">(b) average interest: \$ _____</p> <p>(2) Real property taxes ..... \$ _____</p> <p>(3) Homeowner's or renter's insurance (if not included above) ..... \$ _____</p> <p>(4) Maintenance and repair ..... \$ _____</p> <p>b. Health-care costs not paid by insurance... \$ _____</p> <p>c. Child care ..... \$ _____</p> <p>d. Groceries and household supplies. .... \$ _____</p> <p>e. Eating out. .... \$ _____</p> <p>f. Utilities (gas, electric, water, trash) ..... \$ _____</p> <p>g. Telephone, cell phone, and e-mail ..... \$ _____</p> | <p>h. Laundry and cleaning ..... \$ _____</p> <p>i. Clothes ..... \$ _____</p> <p>j. Education ..... \$ _____</p> <p>k. Entertainment, gifts, and vacation. .... \$ _____</p> <p>l. Auto expenses and transportation (insurance, gas, repairs, bus, etc.) ..... \$ _____</p> <p>m. Insurance (life, accident, etc.; do not include auto, home, or health insurance)... \$ _____</p> <p>n. Savings and investments. .... \$ _____</p> <p>o. Charitable contributions. .... \$ _____</p> <p>p. Monthly payments listed in item 14 (itemize below in 14 and insert total here). . \$ _____</p> <p>q. Other (specify): ..... \$ _____</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>r. <b>TOTAL EXPENSES (a–q)</b> (do not add in the amounts in a(1)(a) and (b)) \$ _____</p> </div> <p>s. <b>Amount of expenses paid by others</b> \$ _____</p> |
|---|---|

**14. Installment payments and debts not listed above**

Paid to	For	Amount	Balance	Date of last payment
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	

**15. Attorney fees** (This is required if either party is requesting attorney fees.):

- a. To date, I have paid my attorney this amount for fees and costs (specify): \$ \_\_\_\_\_
- b. The source of this money was (specify): \_\_\_\_\_
- c. I still owe the following fees and costs to my attorney (specify total owed): \$ \_\_\_\_\_
- d. My attorney's hourly rate is (specify): \$ \_\_\_\_\_

I confirm this fee arrangement.

Date: \_\_\_\_\_

\_\_\_\_\_  
(TYPE OR PRINT NAME OF ATTORNEY)



\_\_\_\_\_  
(SIGNATURE OF ATTORNEY)

PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	
OTHER PARENT/CLAIMANT:	

**CHILD SUPPORT INFORMATION****(NOTE: Fill out this page only if your case involves child support.)****16. Number of children**

- a. I have *(specify number)*: \_\_\_\_\_ children under the age of 18 with the other parent in this case.
- b. The children spend \_\_\_\_\_ percent of their time with me and \_\_\_\_\_ percent of their time with the other parent.  
*(If you're not sure about percentage or it has not been agreed on, please describe your parenting schedule here.)*

**17. Children's health-care expenses**

- a. ☐ I do ☐ I do not have health insurance available to me for the children through my job.
- b. Name of insurance company: \_\_\_\_\_
- c. Address of insurance company: \_\_\_\_\_
- d. The monthly cost for the **children's** health insurance is or would be *(specify)*: \$ \_\_\_\_\_  
*(Do not include the amount your employer pays.)*

**18. Additional expenses for the children in this case**

Amount per month

- a. Child care so I can work or get job training. . . . . \$ \_\_\_\_\_
- b. Children's health care not covered by insurance . . . . . \$ \_\_\_\_\_
- c. Travel expenses for visitation . . . . . \$ \_\_\_\_\_
- d. Children's educational or other special needs *(specify below)*: . . . . . \$ \_\_\_\_\_

**19. Special hardships.** I ask the court to consider the following special financial circumstances*(attach documentation of any item listed here, including court orders):*

Amount per month

For how many months?

- a. Extraordinary health expenses not included in 18b. . . . . \$ \_\_\_\_\_
- b. Major losses not covered by insurance (examples: fire, theft, other insured loss) . . . . . \$ \_\_\_\_\_
- c. (1) Expenses for my minor children who are from other relationships and are living with me . . . . . \$ \_\_\_\_\_
- (2) Names and ages of those children *(specify)*: \_\_\_\_\_

(3) Child support I receive for those children. . . . . \$ \_\_\_\_\_

The expenses listed in a, b, and c create an extreme financial hardship because *(explain)*:**20. Other information I want the court to know concerning support in my case *(specify)*:**

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):   <div style="display: flex; justify-content: space-between;"> <div>TELEPHONE NO.:</div> <div>FAX NO. (Optional):</div> </div> <div style="display: flex; justify-content: space-between;"> <div>E-MAIL ADDRESS (Optional):</div> <div></div> </div> <div style="display: flex; justify-content: space-between;"> <div>ATTORNEY FOR (Name):</div> <div></div> </div>	FOR COURT USE ONLY
<b>SUPERIOR COURT OF CALIFORNIA • COUNTY OF FRESNO</b> 1130 "O" Street Fresno, California 93724-2201	
<b>MARRIAGE OF</b>  PETITIONER:  RESPONDENT:	
<b>RESPONSE</b> <input type="checkbox"/> <b>and REQUEST FOR</b> <input type="checkbox"/> <b>Dissolution of Marriage</b> <input type="checkbox"/> <b>Legal Separation</b> <input type="checkbox"/> <b>Nullity of Marriage</b> <div style="float: right;"><input type="checkbox"/> <b>AMENDED</b></div>	CASE NUMBER:

1. RESIDENCE (Dissolution only) ☐ Petitioner ☐ Respondent has been a resident of this state for at least six months and of this county for at least three months immediately preceding the filing of the *Petition for Dissolution of Marriage*.

2. STATISTICAL FACTS

- a. Date of marriage: \_\_\_\_\_ c. Time from date of marriage to date of separation (specify):  
 b. Date of separation: \_\_\_\_\_ Years: \_\_\_\_\_ Months: \_\_\_\_\_

3. DECLARATION REGARDING MINOR CHILDREN (include children of this relationship born prior to or during the marriage or adopted during the marriage):

- a. ☐ There are no minor children.  
 b. ☐ The minor children are:
- | <u>Child's name</u> | <u>Birthdate</u> | <u>Age</u> | <u>Sex</u> |
|---------------------|------------------|------------|------------|
|                     |                  |            |            |
|                     |                  |            |            |
|                     |                  |            |            |

☐ Continued on Attachment 3b.

- c. If there are minor children of the Petitioner and Respondent, a completed *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)* (form FL-105) must be attached.  
 d. ☐ A completed voluntary declaration of paternity regarding minor children born to the Petitioner and Respondent prior to the marriage is attached.

4. SEPARATE PROPERTY

Respondent requests that the assets and debts listed ☐ in *Property Declaration* (form FL-160) ☐ in Attachment 4  
☐ below be confirmed as separate property.  
Item Confirm to

**NOTICE: You may redact (black out) social security numbers from any written material filed with the court in this case other than a form used to collect child or spousal support.**

MARRIAGE OF <i>(last name, first name of parties)</i> :  _____	CASE NUMBER:  _____
--	---------------------------

**5. DECLARATION REGARDING COMMUNITY AND QUASI-COMMUNITY ASSETS AND DEBTS AS CURRENTLY KNOWN**

- a. ☐ There are no such assets or debts subject to disposition by the court in this proceeding.
- b. ☐ All such assets and debts are listed ☐ in *Property Declaration* (form FL-160) ☐ in Attachment 5b.  
☐ below (*specify*):

6. ☐ **Respondent contends** that the parties were never legally married.
7. ☐ **Respondent denies** the grounds set forth in item 6 of the petition.

**8. Respondent requests**

- |  |  |
|--|--|
| <p>a. <input type="checkbox"/> dissolution of the marriage based on</p> <p style="padding-left: 20px;">(1) <input type="checkbox"/> irreconcilable differences. (Fam. Code, § 2310(a).)</p> <p style="padding-left: 20px;">(2) <input type="checkbox"/> incurable insanity. (Fam. Code, § 2310(b).)</p> <p>b. <input type="checkbox"/> legal separation of the parties based on</p> <p style="padding-left: 20px;">(1) <input type="checkbox"/> irreconcilable differences. (Fam. Code, § 2310(a).)</p> <p style="padding-left: 20px;">(2) <input type="checkbox"/> incurable insanity. (Fam. Code, § 2310(b).)</p> <p>c. <input type="checkbox"/> nullity of void marriage based on</p> <p style="padding-left: 20px;">(1) <input type="checkbox"/> incestuous marriage. (Fam. Code, § 2200.)</p> <p style="padding-left: 20px;">(2) <input type="checkbox"/> bigamous marriage. (Fam. Code, § 2201.)</p> | <p>d. <input type="checkbox"/> nullity of voidable marriage based on</p> <p style="padding-left: 20px;">(1) <input type="checkbox"/> respondent's age at time of marriage. (Fam. Code, § 2210(a).)</p> <p style="padding-left: 20px;">(2) <input type="checkbox"/> prior existing marriage. (Fam. Code, § 2210(b).)</p> <p style="padding-left: 20px;">(3) <input type="checkbox"/> unsound mind. (Fam. Code, § 2210(c).)</p> <p style="padding-left: 20px;">(4) <input type="checkbox"/> fraud. (Fam. Code, § 2210(d).)</p> <p style="padding-left: 20px;">(5) <input type="checkbox"/> force. (Fam. Code, § 2210(e).)</p> <p style="padding-left: 20px;">(6) <input type="checkbox"/> physical incapacity. (Fam. Code, § 2210(f).)</p> |
|--|--|

**9. Respondent requests** that the court grant the above relief and make injunctive (including restraining) and other orders as follows:

- |  | Petitioner               | Respondent               | Joint                    | Other                    |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Legal custody of children to .....  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Physical custody of children to .....   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Child visitation be granted to .....  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| As requested in form: <input type="checkbox"/> FL-311 <input type="checkbox"/> FL-312 <input type="checkbox"/> FL-341(C) <input type="checkbox"/> FL-341(D) <input type="checkbox"/> FL-341(E) <input type="checkbox"/> Attachment 9c. |                          |                          |                          |                          |
| d. <input type="checkbox"/> Determination of parentage of any children born to the Petitioner and Respondent prior to the marriage.  | <input type="checkbox"/> | <input type="checkbox"/> |                          |                          |
| e. Attorney fees and costs payable by .....  | <input type="checkbox"/> | <input type="checkbox"/> |                          |                          |
| f. Spousal support payable to (wage assignment will be issued) .....   | <input type="checkbox"/> | <input type="checkbox"/> |                          |                          |
| g. <input type="checkbox"/> Terminate the court's jurisdiction (ability) to award spousal support to Petitioner.   |                          |                          |                          |                          |
| h. <input type="checkbox"/> Property rights be determined.   |                          |                          |                          |                          |
| i. <input type="checkbox"/> Respondent's former name be restored to ( <i>specify</i> ):  |                          |                          |                          |                          |
| j. <input type="checkbox"/> Other ( <i>specify</i> ):  |                          |                          |                          |                          |

☐ Continued on Attachment 9j.

**10. Child support**— If there are minor children born to or adopted by the Petitioner and Respondent before or during this marriage, the court will make orders for the support of the children upon request and submission of financial forms by the requesting party. An earnings assignment may be issued without further notice. Any party required to pay support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

\_\_\_\_\_  
(TYPE OR PRINT NAME)

Date:

\_\_\_\_\_  
(TYPE OR PRINT NAME)



\_\_\_\_\_  
(SIGNATURE OF RESPONDENT)

\_\_\_\_\_  
(SIGNATURE OF ATTORNEY FOR RESPONDENT)

**The original response must be filed in the court with proof of service of a copy on Petitioner.**

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):  <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div>TELEPHONE NO.:</div> <div>FAX NO. (Optional):</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div>E-MAIL ADDRESS (Optional):</div> <div>ATTORNEY FOR (Name):</div> </div>	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA • COUNTY OF FRESNO</b> 1130 "O" Street Fresno, California 93724-2201	
PETITIONER:  RESPONDENT:	
<b>PROOF OF SERVICE OF SUMMONS</b>	CASE NUMBER:

1. At the time of service I was at least 18 years of age and not a party to this action. **I served the respondent with copies of:**
- a. ☐ Family Law: *Petition* (form FL-100), *Summons* (form FL-110), and blank *Response* (form FL-120)
  - or—
  - b. ☐ Family Law—Domestic Partnership: *Petition—Domestic Partnership* (form FL-103), *Summons* (form FL-110), and blank *Response—Domestic Partnership* (form FL-123)
  - or—
  - c. ☐ Uniform Parentage: *Petition to Establish Parental Relationship* (form FL-200), *Summons* (form FL-210), and blank *Response to Petition to Establish Parental Relationship* (form FL-220)
  - or—
  - d. ☐ Custody and Support: *Petition for Custody and Support of Minor Children* (form FL-260), *Summons* (form FL-210), and blank *Response to Petition for Custody and Support of Minor Children* (form FL-270)
  - and
  - e. ☐ (1) ☐ Completed and blank *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act* (form FL-105)
  - (2) ☐ Completed and blank *Declaration of Disclosure* (form FL-140)
  - (3) ☐ Completed and blank *Schedule of Assets and Debts* (form FL-142)
  - (4) ☐ Completed and blank *Income and Expense Declaration* (form FL-150)
  - (5) ☐ Completed and blank *Financial Statement (Simplified)* (form FL-155)
  - (6) ☐ Completed and blank *Property Declaration* (form FL-160)
  - (7) ☐ *Order to Show Cause* (form FL-300), *Application for Order and Supporting Declaration* (form FL-310), and blank *Responsive Declaration to Order to Show Cause or Notice of Motion* (form FL-320)
  - (8) ☐ Other (specify):
2. Address where respondent was served:
3. I served the respondent by the following means (check proper box):
- a. ☐ **Personal service.** I personally delivered the copies to the respondent (Code Civ. Proc., § 415.10) on (date): \_\_\_\_\_ at (time): \_\_\_\_\_
  - b. ☐ **Substituted service.** I left the copies with or in the presence of (name): \_\_\_\_\_ who is (specify title or relationship to respondent): \_\_\_\_\_
    - (1) ☐ **(Business)** a person at least 18 years of age who was apparently in charge at the office or usual place of business of the respondent. I informed him or her of the general nature of the papers
    - (2) ☐ **(Home)** a competent member of the household (at least 18 years of age) at the home of the respondent. I informed him or her of the general nature of the papers

PETITIONER:	CASE NUMBER:
RESPONDENT:	

3. b. (cont.) on (date): \_\_\_\_\_ at (time): \_\_\_\_\_

I thereafter mailed additional copies (by first class, postage prepaid) to the respondent at the place where the copies were left (Code Civ. Proc., § 415.20b) on (date): \_\_\_\_\_

A **declaration of diligence** is attached, stating the actions taken to first attempt personal service.

c. ☐ **Mail and acknowledgment service.** I mailed the copies to the respondent, addressed as shown in item 2, by first-class mail, postage prepaid, on (date): \_\_\_\_\_ from (city): \_\_\_\_\_

(1) ☐ with two copies of the *Notice and Acknowledgment of Receipt (Family Law)* (form FL-117) and a postage-paid return envelope addressed to me. **(Attach completed Notice and Acknowledgment of Receipt (Family Law) (form FL-117).)** (Code Civ. Proc., § 415.30.)

(2) ☐ to an address outside California (by registered or certified mail with return receipt requested). **(Attach signed return receipt or other evidence of actual delivery to the respondent.)** (Code Civ. Proc., § 415.40.)

d. ☐ **Other** (specify code section): \_\_\_\_\_

☐ Continued on Attachment 3d.

4. The "NOTICE TO THE PERSON SERVED" on the *Summons* was completed as follows (Code Civ. Proc., §§ 412.30, 415.10, 474):

a. ☐ As an individual **or**

b. ☐ On behalf of respondent who is a

(1) ☐ minor. (Code Civ. Proc., § 416.60.)

(2) ☐ ward or conservatee. (Code Civ. Proc., § 416.70.)

(3) ☐ other (specify): \_\_\_\_\_

#### 5. Person who served papers

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_

This person is

a. ☐ exempt from registration under Business and Professions Code section 22350(b).

b. ☐ not a registered California process server.

c. ☐ a registered California process server: ☐ an employee or ☐ an independent contractor

(1) Registration no.: \_\_\_\_\_

(2) County: \_\_\_\_\_

d. **The fee** for service was (specify): \$ \_\_\_\_\_

6. ☐ **I declare** under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

—or—

7. ☐ **I am a California sheriff, marshal, or constable**, and I certify that the foregoing is true and correct.

Date: \_\_\_\_\_

\_\_\_\_\_  
(NAME OF PERSON WHO SERVED PAPERS)



\_\_\_\_\_  
(SIGNATURE OF PERSON WHO SERVED PAPERS)